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Historical Dialogue Between Theologians and Psychologists 1940-1960

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**QUESTIONING PSYCHOLOGICAL HEALTH:
CONTEXTUALIZING CONTEMPORARY
PSYCHOLOGICAL THEORY THROUGH
HISTORICAL DIALOGUE BETWEEN
THEOLOGIAN AND PSYCHOLOGISTS 1940-1960.**

Britt-Mari Sykes

**A thesis submitted to the Faculty of Graduate and
Postdoctoral Studies of the University of Ottawa in
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ABSTRACT

The thesis explores a dialogue between psychology and religion around the large question of what constitutes psychological health and well-being. It does so by examining three historical – but virtually unknown - illustrations of interdisciplinary dialogue between theologians and psychologists that took place in the United States from 1940 – 1960 and then by looking at two more contemporary theoretical voices within the discipline of psychology. The thesis contends that the questions and concerns raised by mid-twentieth century psychologists and theologians continue to resonate deeply within contemporary debate about care (both of ourselves and others), psychological health and fulfillment, and the well-being of society generally.

The three historical illustrations used in the thesis are the minutes of and paper presentations at the New York Psychology Group (1941-1945), the lecture series of existential psychoanalyst Viktor Frankl at Harvard Divinity School in 1957 and the Harvard Project on Religion and Mental Health directed by Hans Hofmann from 1957 – 1961. In all three cases, proponents challenged the social sciences, criticized what they saw as psychological scientism, and desired to enlarge psychology's view of human existence and make it one of relationality, social context and ethics. They saw the individual as both a receptive and responsive agent in particular cultural, economic, political and religious contexts, ethically drawn to contribute to, and shape, those contexts.

In light of these historical dialogues, the thesis then addresses similar issues in the post-modern reflections of critical psychology and introduces the contemporary theory and therapy of Existential Analysis and suggests its potential role in linking historical and contemporary dialogue between psychology and religion.

**THIS THESIS IS DEDICATED TO MARJORIE, SUSAN
AND HANNAH - GRANDMOTHER, MOTHER AND
DAUGHTER**

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CHAPTER ONE

INTRODUCTION: QUESTIONING THE MEANING OF PSYCHOLOGICAL HEALTH

[Mankind] has always tried to decipher the puzzling fragments of life. That attempt is not just a matter for the philosophers or priests or prophets or wise men in all periods of history. It is a matter for everyone. For every [man] is a fragment [himself]. [He] is a riddle to [himself]; and the individual life of everyone else is an enigma to [him], dark, puzzling, embarrassing, exciting, and torturing. Our very being is a continuous asking for the *meaning* of our being, a continuous attempt to decipher the enigma of our world and our heart¹

The Thesis

We begin this thesis with a quotation by theologian Paul Tillich that I think encapsulates the search, the questioning and ultimately, the ambiguity that confronts us when we attempt to know who we are as human beings. This quotation highlights the search and the dialogue we need to engage in continually and creatively as human beings. This thesis is a questioning and analysis of psychological health and well-being, concepts which are inherently ambiguous and fluid. Any discussion of mental health inevitably opens paths to existential, philosophical, religious and ethical questions about who we are and the meaning and purpose of our existence. This, as Tillich reminds us, requires an interdisciplinary approach and a comfort with questions as opposed to precise answers.

This thesis is about dialogue. It explores questions and dialogue between

¹ Paul Tillich, "Knowledge Through Love" from *The Shaking of the Foundations*, (New York: Charles Scribner's Sons, 1948), 111.

psychologists and theologians about what constitutes mental health and well-being. In doing so, it raises the issue of care, both for ourselves and others, and thus points to a responsibility we all share about “our” collective well-being, regardless of whether we are in the fields of psychology or theology. Throughout this thesis, the “meaning of our being”, as Tillich refers to it, often exposes moral and ethical sub-texts and implications.

The discipline I am engaged in, which calls itself the “psychology of religion”, contains a range of theoretical approaches. The discipline’s strength as an intellectual inquiry lies precisely in the variety of approaches and perspectives that attest to the multi-dimensional character of its primary subject: human experience and religious expression. Dominant trends within the field have significantly influenced the direction and tone of scholarship and have resulted in a neglect of other important paradigms. For example, psychology of religion relies heavily on an empirical social scientific approach to define and study religious phenomena. This has resulted in not only prioritizing empirical research to study religion and its related expressions of behavior, cognition and affect, it has also produced an unwavering and unquestioning dependence on psychological theory and what psychological research can accomplish². Because of this, the discipline of psychology of religion has overlooked many fruitful areas of interconnection between psychology and theology. One such area is the subject of this thesis: a series of dialogues

² Jeremy Carrette has spoken and published on this un-reflective dependence on psychological theory by scholars within the field of psychology of religion. An example of his views can be found in, Jeremy R. Carrette, “Post-Structuralism and the Psychology of Religion: The Challenge of Critical Psychology” in *Religion and Psychology: Mapping the Terrain*, ed. Diane Jonte-Pace and William B. Parsons, 110-126 (London: Routledge, 2001). David Wulff has also spoken and written about the discipline’s dependence on empirical theory and suggested the expanded use of more hermeneutical approaches. His key-note address at the “100 years of Psychology and Religion” conference in Amsterdam, the Netherlands in May, 2003 addressed these issues. See also David M. Wulff, “A Field in Crisis: Is it Time for the Psychology of Religion to Start Over?” in *One Hundred Years of Psychology of Religion: Issues and Trends in a Century Long Quest*, ed. Peter H.M.P. Roelofsma, Jozef M.T. Corveleyn and Joke W. van Saane, 11 – 32 (Amsterdam: VU University Press, 2003).

that took place mid-twentieth century in the United States between theologians and psychologists. This oversight may be a reluctance on the part of both psychology and the psychology of religion to fully acknowledge and analyze the Judeo-Christian roots within psychological theory, including the re-translation of Judeo-Christian ethics. This may in part be due to the academic split between religious studies and theology. Psychology of religion has also been reluctant to acknowledge, and therefore make use of, certain models of psychotherapy within its scholarship. This has resulted in a de-emphasis, if not omission, of the existential psychotherapies, for example. Finally, the discipline has tended to neglect what many psychologists actually do, namely, therapy. Addressing therapy itself, its aim, purpose and place within our culture, can only enhance the continued relevance of the field. What transpires between therapist and client is, in very broad terms, a dialogue between individual and cultural ethics, a dialogue of values, meanings and religious expression.

This thesis attempts to redress some of these omissions. It does so in the following three ways. First, it emphasizes the dialogue between psychology and theology. This will be illustrated by focusing on several dialogues that took place in the United States during the mid-twentieth century. The New York Psychology Group 1941-1945, existential psychoanalyst Viktor Frankl's first lecture series at Harvard Divinity School in 1957 and Hans Hofmann's direction of the Harvard Project on Religion and Mental Health from 1957 – 1961 are the subject of chapters 2, 3 and 4 respectively. Second, in chapter 5, the thesis addresses some of the issues raised by post-modern theory such as critical psychology in light of those earlier dialogues. Interestingly, many of the topics debated in the 1940's and 1950's are similar to questions and inquiries being

made today: the nature and essence of human existence, the care and responsibility for another human being, what constitutes psychological well-being and fulfillment, the ethics of psychology and the link between individual and cultural development. Third and finally, in chapter 6 the thesis will introduce Alfried Längle's theory of existential analysis. Existential analysis, as both a theoretical and therapeutic approach can provide a pivotal link between historical and contemporary issues that comprise the dialogue between psychology and religion.

The introduction of theological and psychological discussions from the past will, I hope, contribute to a reconsideration of intellectual insights and highlight the practical relevance of the older historical dialogues. Philip Cushman has suggested, in his in-depth study of the cultural history of psychotherapy, how important historical context is. He states, "only a radical perspective, a historically situated, philosophical hermeneutic perspective can begin to embrace the complexity of the interrelationship of individual, society, and nature. Only a perspective that analyzes the larger sociocultural framework, such as distinctions among individual, society, and nature can properly ask the hard questions about psychological theory".³ Extending Cushman's suggestion to the discipline of psychology of religion, this thesis will analyze several virtually unknown archival documents in order to illuminate the dialogue between theology and psychology in the mid-twentieth century. These documents include: the full minutes of, and members' paper presentations to, the New York Psychology Group 1941 - 1945 and the six original audiotapes of Viktor Frankl's first lecture series at Harvard Divinity School in 1957. Although Hans Hofmann's direction of the Harvard Project on Religion and

³ Philip Cushman, *Constructing the Self, Constructing America: A Cultural History of Psychotherapy* (United States: Da Capo Press, 1995), 282-283.

Mental Health from 1957 - 1961 yielded several edited compilations of the project's work, almost no analysis exists on the project itself.

We must acknowledge the richness of these historical interdisciplinary dialogues and their contribution to an understanding of what was loosely called, the religion and mental health movement that began in the United States at about the same time as the New York Psychology Group. As we will see, key themes, debates and profound questions about human nature re-emerge and overlap in each of the illustrations. Finally, questions and debates that characterize the dialogues between theologians and psychologists of the past re-appear in contemporary debates on the aim and purpose of psychology in western culture.

The historical illustrations, exposed in this thesis, provide a strong contextual foundation for much of contemporary debate. Post-modern theories such as critical psychology, although raising many similar questions, rarely utilize historical material, especially religious or theological contributions. While critical psychology mounts an important debate for the discipline of psychology, it seems unaware of a rich historical foundation and perspective for many of its enquiries.

The introduction of Alfried Längle's existential analysis facilitates the recovery of the "self" (virtually "deconstructed" in critical psychology) and re-kindles the spirit and depth of dialogue between the concepts of self and other. Existential analysis is one contemporary theory capable of bridging debates from the past to the present. Together, these historical and contemporary illustrations point to the value of interdisciplinary and

open-ended approaches that are necessary in order to discuss what Tillich called the “continuous attempt to decipher the enigma of our world and our heart”.⁴

I hope the exposure of these historical documents, in particular, will draw our attention to many profound questions and debates from the past that foreshadow so much of our current reflections.

Historical Dialogue Between Psychology and Theology

During the mid-twentieth century many dialogues occurred between theologians and psychologists. These dialogues stemmed from concerns about psychology’s growing influence on how we saw ourselves. Decades before critical psychology began questioning the place of psychology within our culture, psychology’s alignment with science and scientific paradigms could be seen in its theoretical stance of objectivity and neutrality it took toward its primary subject: human beings and the nature of human existence itself. This trend created, and indeed has continued to create, a static view of human development predominantly focused on a concept of individuality seemingly devoid of cultural, historical or political context. Dialogues between theologians and psychologists mid-century were motivated by a desire to shift psychology’s view of human existence, in fact enlarge it, and make it one of relationality and social context. Their interdisciplinary dialogues sought to challenge the social sciences which, they claimed, had omitted the value and dignity of individual life and the relational essence of being human. Indeed, the ambiguity and precariousness of being human, they argued, was unacknowledged by psychological scientism.

⁴ Paul Tillich. “Knowledge Through Love”, 111.

The various dialogues that took place in the mid-twentieth century in the United States focused on a relational and ethical view of individual development. The value and dignity of the individual was seen simultaneously as a reflection or microcosm of the larger world. Inextricably linked and grounded in both historical and present-day cultural, economic, political and religious contexts, the individual was seen as both a receptive agent of these contexts and a responsive agent capable and ethically drawn to contribute to, and shape, these same landscapes. Seeing the individual as a relational being, exposed the fluidity in concepts such as self and world. This in turn revealed the ambiguity and near impossibility of truly capturing the essence of human experience. That ambiguity, however, was not seen as negative. Rather, acknowledging the ambiguous nature of human existence was seen as providing a positive impetus for continuous creative questions and pursuits about our human potential.

Throughout the thesis, the large issue of what constitutes health, specifically mental health, emerges continuously. The connection between religion and mental health, visible in chapters 2, 3 and 4, stemmed from several factors. One was the dramatic rise of psychiatry and psychoanalysis in western culture and the subsequent increase in the acceptance of these fields and their perspectives by the general public. Another was the Second World War which created a growing public awareness of health care issues in light of the severe psychiatric disorders of some returned soldiers.⁵ This in turn led many, in what Allison Stokes calls the “new liberal intelligensia”⁶ in the United States, to begin questioning a growing dependence on social scientific paradigms to

⁵ Eva Moskowitz offers a very good history of the rise of psychiatric disorders in the United States following WWII. Eva S. Moskowitz, *In Therapy We Trust: America's Obsession with Self-Fulfillment* (Baltimore: The John Hopkins University Press, 2001).

⁶ Allison Stokes, *Ministry After Freud* (New York: The Pilgrim Press, 1985).

analyze and prescribe ways to achieve the “a normal healthy life”. In terms of interdisciplinary dialogue, this new liberal intelligensia, made up – to name but two - of social scientists and liberal Protestant theologians (many of whom had come from war-torn Europe) shared an over-arching ethical concern to preserve humanity and Western civilization. That common concern brought the traditionally separate cultural discourses of theology and psychology together in dialogue.

Seward Hiltner, a prominent figure in pastoral counseling in the United States and a member of the New York Psychology Group from 1941 – 1945, wrote frequently on the relationship and dialogue between psychology and religion. Like so many of his colleagues, Hiltner linked general themes of human freedom and transformation to questions of what constituted individual mental health. In 1943, he commented on the peculiarity of using “normal” as a benchmark in defining mental health. The meaning of normal was itself problematic. He stated, “Science frequently flounders when dealing with the ‘normal’, unless it be dealing with the average. Such definitions of health as ‘efficient and happy living’ do not seem to help us much”⁷. Was health merely the absence of something or was it something more? Could the definition of mental health be expanded, and if it were to be expanded, what would it cover? Hiltner wondered indeed whether definitions of health should not in fact be expanded to include larger ethical and social issues or whether that would complicate matters even further. As we will see in chapter 2, members of the New York Psychology Group, both theologians and psychologists alike, spoke passionately about expanding the definition of psychological health and did this with a tone of urgent social, ethical, humanitarian and political appeal.

⁷ Seward Hiltner, *Religion and Health*, (New York: The Macmillan Company, 1943), 82.

In chapter 3, we take a detailed look at both Viktor Frankl's theory of Logotherapy and the series of lectures he gave at Harvard Divinity School during his first tour of the United States in 1957. Rollo May, an American existential psychologist and member of the New York Psychology Group during the 1940's offers an illuminating analysis of the period when Frankl came to the United States and the subsequent emergence of "American" existential psychotherapies in the 1960's. In an article in the 1961-62 issue of *The Journal of Religion and Health*, May outlined the "cultural conditions" that had led to the development of existential psychology in Europe. He wrote, "called forth by the experience of tragedy, especially in Europe between the two wars, by the confronting of the contradictions in modern rationalism; and by the conviction that our usual approaches to the science of man in psychology and psychiatry did not touch the nature of man or the deepest well-springs of his behavior and experience...our European colleagues believed, too, that our sciences of man played into the very tendencies in the modern industrial developments to sap the individual's sense of worth and responsibility".⁸

May was aware of the growing experiences of emptiness and meaninglessness that clients were expressing to therapists. He wondered whether psychology's reliance on science and the development of psychological technique to adjust a person to "good health" did not in fact support a particular social ethic and require patients to conform to an implicit value system based on modern culture and its vision of humankind. It was from such concerns that the existential psychologies emerged with their focus on the value and dignity of each individual inextricably linked to the social world. "In my judgment", May wrote, "the existential approach is the achieving of individuality not by

⁸ Rollo May, "Existential Psychiatry", *Journal of Religion and Health*, 1 (1961-62), 32.

by-passing or avoiding the conflictual realities of the world in which we find ourselves – which for us happens to be Western culture – but by confronting and meeting these realities directly to achieve individuality and meaningful interpersonal relations”.⁹ The problem May spotted was that psychology was well on its way to simplifying and reducing human behavior and action. May wrote, “the endeavor to understand phenomena by isolating out the simpler aspects of the behavior and making abstractions of them, such as drive and force, is useful in some aspects of science, but is not adequate for a science of man that will help us understand human anxiety, despair and other problems that beset the human psyche”.¹⁰ Echoing Viktor Frankl, May characterizes the existential position as follows: “in the revealing and exploring of these deterministic forces in a patient’s life, the patient is orienting himself [or herself] in some particular way to the data and thus engaged in some choice, no matter how seemingly insignificant, is experiencing some freedom, no matter how subtle”.¹¹

In chapter 4, we look at Hans Hofmann’s direction of the Harvard Project on Religion and Mental Health. Once again, we have a rich historical illustration of theologians and psychologists coming together to question the aim, purpose and applicability of psychological theory. In this specific example, the Harvard Project addressed the contemporary minister’s role in light of the powerful influence of psychology on mid-century culture and the effect that had on the issues and problems parishioners brought to their minister’s attention. Again, in order to discuss and analyze these issues, interdisciplinary collaboration was seen as the most fruitful approach. The Harvard project therefore engaged the participation of Harvard professors from both the

⁹ May, 35.

¹⁰ May, 37.

¹¹ May, 38.

psychology and sociology departments in this endeavor. At the same time, the interdisciplinary nature of the project also elicited reflective analysis on religion itself and its place and relevance in contemporary society. Hofmann wrote,

The question is whether a human being, troubled by our time and [his] place in it, can be healthy and productive merely by submitting to the tenets and rituals which [his] religion prescribes for [him]. Is it possible that religion should play a different role? Religion itself may prove to be one area of life – perhaps the one that offers the most profound possibilities of all – where the struggle with personal turmoil can provide the means to a radical renewal of our society and culture.¹²

We could substitute psychology for religion in this quotation of Hofmann's and ask whether a human being can be healthy and productive merely by submitting to the tenets and rituals which psychology prescribes for him or her? The argument throughout this thesis is that mental health and well-being are in fact contingent upon dialogue, contingent upon the simultaneous valuing of the individual and a valuing of the inter-relational reality of human life. Context, relationship and dialogue shift psychology's emphasis on and ideal of the known "self" to the unknown, the ambiguous, and the fragments of human potential waiting to be continuously deciphered. Hofmann's "radical renewal of our society and culture", a wish echoed by voices within contemporary critical psychology, can only happen through dialogue. All of these issues benefit from historical perspective and contemporary debate. My hope is that this thesis provides some illumination of both.

¹² Hans Hofmann, *Religion and Mental Health: A Casebook with Commentary and an Essay on Pertinent Literature*, (New York: Harper and Brothers, 1961), xiv.

Questioning Health and Well-Being From a Therapeutic Perspective

As human beings, we are, Tillich suggests, an enigma to ourselves and to others. At the same time, we are also motivated to decipher who we are, both individually and collectively. This continuous search for self-understanding, for the meaning of both “my” and “our” existence cannot, as Tillich states, be limited to one field of activity. Deciphering the scope and depth of human possibility often yields a fragment of understanding and more often results in yet another question which fosters yet another search. Tillich’s description of our fragmentary nature describes this idea of the fundamentally ambiguous character of human existence.

The idea of constantly searching for meaning and the discovery of fragmentary moments of knowledge has often led me to ponder the expectations of individuals who seek out therapy. Do they enter the therapeutic world with an already formed and internalized idea about what therapy is and what it will provide them in their own search? We have come to assume that human existence should be fulfilling, that “normal” development exists, that it is attainable, and that therapy will facilitate it. Further, our belief that psychology offers scientific facts and givens about our existence, has led us to think that individually we have no personal responsibility in actively discovering and creating our fulfillment. What constitutes a fulfilling existence, what might be the appropriate response or decision in a given moment are both individually and culturally constructed, historically situated, politically motivated and filled with ethical overlays and often, religious subtext.

Following a presentation I gave on Alfried Längle’s theory of existential analysis (the topic of chapter 6) to the Forum for Existential Psychology and Therapy in

Copenhagen, Denmark on May 5, 2004, several interesting and challenging issues arose during the question and answer period. These questions were not only a challenge for me, they posed a challenge to almost every member of the audience, all of whom were either clinicians or academics in the field of existential psychology. Does working within, and from, an existential psychotherapeutic perspective make a difference in how we approach another human being? Existential psychotherapies emphasize a humane approach to theory and therapy, one that acknowledges the dignity and uniqueness of the individual while simultaneously seeing that individual as inextricably, and in many senses, ethically embedded in the world around them. If the expressions of a client's subjective experience, in dialogue with the world around him or her, are fundamental to existential therapy, how do we, as therapists, distinguish our role as professional from a relationship of one of human being sitting before another? Is the role in fact different? Is the care for another person or our desire to "help" clearly different, depending on whether we are therapist, friend, family member or simply a fellow human being? Is there a difference in our attitude of responsibility towards another person if we face the other person as "professional"? How do we reflect on our own desire to "help" and our role as "professional helper"?

In many instances, those seeking therapy tend to assume certain ethical boundaries on the relationship. The assumption is that the therapist is there to help and fulfill the request being made for a unique kind of service. The therapist clearly has a specific role to fulfill. Existential psychotherapies stress dialogue between therapist and client. As such, there is a clear acknowledgment that both the therapist and client are mutually confronted, contribute to, and are changed by the dialogue that takes place

within therapy. There is an assumption, on both sides, that healing is possible within this arena of dialogue and mutual respect.

One on level, these questions highlight a very postmodern inquiry: what exactly does psychology do? Psychology focuses on how a human being navigates life. Therapy tends to begin at a perceived moment of crisis, an individual's feelings, behaviors and thoughts are distinguished experientially as somewhat out of the ordinary, out of the realm and continuum of what we culturally and psychologically classify as normal or productive. A client requests something of a therapist in the midst of this crisis. The request made by the client is, on another level, a plea from one human being to another. The client expresses questions about their existence: this is my life, my existence, these are my feelings, my story, hear and understand me. In many cases, there is a direct request by the client for help, a request for specific advice about an appropriate, healthy and "normal" strategy to navigate the questions and issues presented. The discussion that followed my presentation in Copenhagen was a challenge to each of us. We raised very important, open-ended and difficult questions to answer. It reminded me of a comment Dr. Frederic Flach made during the 1963 symposium of the American Academy of Religion that, "the special, intimate, and independent nature of psychotherapy preserves a kind of isolation that makes it difficult to know what really takes place in the consulting room".¹³

In spite of the open-ended questions, a few common themes bound those of us who work from an existential perspective, both academically and therapeutically. We all thought the answers to these vast questions should in fact remain necessarily open and

¹³ Dr. Frederic Flach, forum discussion entitled, "Moral Values in Psychoanalytic Education and Practice" in Academy of Religion and Mental Health, *Moral Values in Psychoanalysis* (New York: Academy of Religion and Mental Health, 1963), 30.

ever changing. We also want to care for others. That desire to care for others carries with it both individual values and assumptions and moral views about human existence. These too we need to be constantly aware of and constantly question. We want to open the “role” of therapist to more communal issues of duty, responsibility and what it means to be bound to another human being.

To do all this we need interdisciplinary dialogue. This, however, tends to be beyond the parameters of psychology proper as dialogue of this nature engages ethics, philosophy, values and meanings. It requires psychology to be open to the arena of religion: to beliefs, faith and images of what it is to be human. The British moral philosopher Mary Midgley sees these as impossible but worthy avenues of inquiry. They do in fact produce more questions and leave us in even more ambiguous waters. She states, “human beings are distinctive in being enormously more aware than other creatures both of their individuality and of the factors, both inside and outside them, that compromise it. They can think and talk and argue about these things, so can they share much of their experience and help each other with these problems. They can be aware of forces that are prolonging or changing their ways of life and they can, if they wish, direct their efforts to supporting or resisting them. Our unity as individuals is not something given. It is a continuing, lifelong project, an effort constantly undertaken in the face of disintegrating forces”.¹⁴ I agree with Midgley and would argue that these questions reflect the ongoing struggle to bring issues and concerns about individual and community well-being together as obvious partners in dialogue instead of seeing them as perpetually in opposition.

¹⁴ Mary Midgley, *The Ethical Primate: Humans, Freedom and Morality*, (London: Routledge, 1996), 23.

Opening the Door to a Dialogue with Ethics

Bridging individual and community well-being and development, as suggested, opens psychological enquiries to a dialogue with morals and ethics. Don Browning commented in his book, *The Moral Context of Pastoral Care* that “the major difference between the minister and the secular psychotherapist is that the minister has a direct professional responsibility to help shape this moral universe of values and meanings”.¹⁵ The secular psychotherapist by contrast, “has not been trained to occupy the role of a social moralist”.¹⁶ The discipline of psychology might well say the same about itself, given its alliance with the natural sciences, but the actual care of others within the therapeutic setting may involve something else entirely and may ultimately require more of its practitioners. As Browning states, “the secular psychotherapies are not neutral scientific formulas for curing people. This is not to say that those disciplines in no way contain scientific knowledge. It does mean, however, that no matter how scientific is the theory behind various secular psychotherapeutic disciplines, the actual practice of psychotherapy is always a practical human art. In actual practice both the theory and the techniques of psychotherapy become absorbed into broader spheres of cultural meaning and the neutral scientific meaning is lost”.¹⁷ Therapies such as existential analysis rest on an empathetic and phenomenological position towards the client and as such say something about how we care for our fellow human beings. Are these the personal moral convictions of the therapist or a culturally shared ethic of care that can legitimately be part of a psychotherapeutic approach?

¹⁵ Don S. Browning, *The Moral Context of Pastoral Care*, (Philadelphia: The Westminster Press, 1976), 11.

¹⁶ Browning, 2.

¹⁷ Browning, 12.

These kinds of questions always bring psychology, particularly psychotherapy, in direct dialogue with the broader culture. Psychotherapy, therefore, cannot be objective and “scientifically” neutral. The act of caring, to desire to care for others and about others, assumes a desire to help “persons with their pain and suffering. It aspires to help individuals to change the course of their lives and to grow”.¹⁸ This desire, for Browning, parallels the “dynamics of religion”.¹⁹ These questions, although aimed at psychology, inspire dialogue between psychology and theology.

I would like to note that this is not a thesis about ethics. Although the word ethics is used liberally throughout the thesis, I am not engaged in a philosophical discussion of it. Rather I am pointing out that any dialogue between psychology and theology/religion necessarily opens the door to questions of ethics. Indeed, the major purpose of a dialogue between psychology and religion is precisely to raise that question. Psychology often implicitly portrays “ideal” images of human existence and perhaps not so subtly offers techniques and “know-how” for a good, productive and fulfilling life, all concepts with an ethical base. Often unwittingly, psychology transmits and perpetuates values and ethics about human existence. I think the same could be said of therapy. For the purpose of this thesis, and in light of the kind of dialogue that took place in the mid-twentieth century between theologians and psychologists, a dialogue that continues to resonate in contemporary psychological theory, my use of the term ethics is grounded in very general Christian notions of relatedness, belongingness, responsibility, community, care and social justice. This thesis concentrates on the dialogues themselves but it makes frequent passing allusions to the ethical subtext of the dialogues. What I study here may

¹⁸ Browning, 12.

¹⁹ Browning 13.

possibly re-orient our conceptions of well-being and mental health to acknowledge a foundation, in part, based on Judeo-Christian ethics.²⁰

The question of whether therapy, specifically, does or does not impose values seems to emerge any time one questions the nature and purpose of psychology. Direct questions by a client about: the meaning of life and the meaning and purpose of one's life specifically, how one should live, what moral values one should follow or simply, "what should I do", are traditionally seen as religious enquiries and not psychological ones. Yet many clients express personal variations of these philosophical questions. Both members of the New York Psychology Group and Viktor Frankl raised the issue about the transmission of values by the therapist and the so-called "psychological" questions clients brought to therapy. Those psychological questions, it was observed, were often difficult to distinguish from religious or ethical questions. Similarly, was the therapist value neutral, if not, did they transmit "psychological" values as distinct and separate from cultural values laden with religious ethic. Therapist Edith Weisskopf-Joelson provides an astute observation from 1957 that precedes post-modern critiques about psychology's belief that it should not and does not transmit values, when in fact it does.

The great majority of psychotherapists in this country are quite sure that the therapist should in no way influence the patient as far as any value system is concerned. There is a very large school of psychotherapy which is called 'the non-directive' school, and the idea is that the therapist should give the patient no guidance at all, but should permit the patient to unfold his own personality. Such therapists tend to say very little, but one word that is used very often is the word 'um hum'. If you examine such

²⁰ A scholarly exploration on the relationship between Judeo-Christian ethics and psychotherapy is eloquently and creatively addressed in the current work of Alvin C. Dueck of the Graduate School of Psychology at Fuller Theological Seminary. Several examples include, Alvin C. Dueck, "Levinas, Ethics and Psychotherapy", a paper presented at the American Psychological Association in August, 2004, Alvin C. Dueck and T.D. Parsons, "Integration Discourse: Modern and Postmodern", *Journal of Psychology and Theology*, 32, 3 (2004), 232-247 and Alvin C. Dueck and Kevin Reimer, "Religious Discourse and Psychotherapy", *International Journal of Existential Psychology and Psychotherapy*, 1, Issue 1 (July 2004), 3-15.

therapeutic interviews you are going to find that 'um hum' is a powerful word, and that you can do something which approaches brain washing just by the way you time this 'um hum'....My feeling is that if one person interacts in any way with another person, he [or she] is going to disseminate values. So we might as well be explicit about it, admit it, and think about it. I have a sneaking suspicion about the reluctance of the modern psychotherapist to stress the development of a value system or a philosophy of life. Even if we would think it necessary to help the patient understand what life is all about, would we know what to tell him [or her]?²¹

With all this in mind, we begin a dialogue between psychology and theology on psychological well-being.

²¹ Edith Weisskopf-Joelson, *Psychology and the Insights of Religion*, paper given on November 13, 1959 at the First Unitarian Church, Cincinnati, Ohio. Viktor E. Frankl Collection; Graduate Theological Union Archives, Berkeley, CA., 1 – 6.

CHAPTER TWO

PAUL TILLICH AND THE NEW YORK PSYCHOLOGY GROUP 1941- 1945

We talk and talk and never listen to the voices speaking to our depth and from our depth. We accept ourselves as we appear to ourselves, and do not care what we really are. Like hit-and-run drivers, we injure our souls by the speed with which we move on the surface; and then we rush away, leaving our bleeding souls alone. We miss, therefore, our depth and our true life. And it is only when the picture that we have of ourselves breaks down completely, only when we find ourselves acting against all the expectations we had derived from that picture, and only when an earthquake shakes and disrupts the surface of our self-knowledge, that we are willing to look into a deeper level of our being.²²

Introduction: The Emergence of a Religion and Mental Health Dialogue

The theologian Paul Tillich made many astute and profound observations about human nature. The quotation that begins this chapter, taken from Tillich's famous collection of sermons, *The Shaking of the Foundations*, was written during the years Tillich taught at Union Theological Seminary from 1933 – 1956. To what extent, Tillich asks, do we truly see ourselves, truly know ourselves? The assumptions we have about who we are and what we are capable of often mirror the certitude with which psychology and theology also make claims about human nature. What happens then, Tillich asks, when that certitude or seeming security is shaken or shattered? This quotation is fascinating in light of the discussions that took place between 1941 and 1945 in a casual

²² Paul Tillich, "The Depth of Existence", in *The Shaking of the Foundations*, (Charles Scribner's Sons: 1948), 56.

monthly gathering known as the New York Psychology Group²³ (hereinafter referred to as the NYPG). In the midst of the catastrophe of WWII, shaken and questioning the depth of change and uncertainty in the world, psychologists and theologians, many of whom were European émigrés, gathered together for interdisciplinary discussion. The intention of this chapter is to give an illustration of the questions and debates both psychologists and theologians felt were necessary to discuss collaboratively given the context of global war, politics and cultural change. These questions include: a general assessment of the role of psychology itself and the limitations of both psychology and theology in analyzing human nature. Specifically, how does one analyze faith amidst chaos, how do we care for one another and what are the differences between psychological and religious help? Much of the chapter focuses not so much on Tillich's direct contributions but rather on the intellectual perspectives and viewpoints that surrounded him for nearly five years. The legacy of these somewhat private discussions was, for Tillich, an enduring affiliation with interdisciplinary groups engaged in the dialogue between psychology and theology until his death in 1965.

²³ The New York Psychology Group of the National Council on Religion and Higher Education, 1941-1945. Very little is known about this group, even less is published. I wish to thank Prof. Allison Stokes of Ithaca College, New York for providing Professor Terry Cooper and me with the collective minutes and members' papers from this group. Prof. Stokes was given these materials directly from Seward Hiltner, a prominent figure in pastoral counseling in the United States, founding member of the NYPG, and active in the New York group throughout its duration. Prof. Stokes published a chapter on the group entitled, "Seward Hiltner, Paul Tillich and the New York Psychology Group" in her book *Ministry After Freud*, (New York: Pilgrim Press, 1985). The chapter outlines the historical context for the group and provides biographical material on many of its prominent members. Brief mention that Tillich participated in the group can also be found in a footnote in Wilhelm and Marion Pauck's book, *Paul Tillich: His Life and Thought*, New York: Harper & Row, 1976. Terry Cooper of the department of Psychology at St. Louis Community College – Meremec presented a paper on the New York Psychology Group (based on the minutes and papers provided by Prof. Allison Stokes) to the North American Paul Tillich Society section of American Academy of Religion, annual meetings in San Antonio, Texas in November, 2004. Cooper also devotes two chapters to the New York Psychology Group in his recently published book, *Paul Tillich and Psychology: Historic and Contemporary Explorations in Theology, Psychotherapy, and Ethics*, (Mercer University Press, 2006). A forthcoming publication based on a manuscript under contract with Mercer University Press by Britt-Mari Sykes entitled *Meaning and Responsibility: Paul Tillich's Dialogue with Psychology* also includes a chapter on the group. I would like to thank Terry Cooper for his generosity and for our numerous conversations and collaborations regarding the NYPG.

Tillich's fascination with the discipline of psychology spanned decades. He wrote frequently on the topic of psychology and the relation between psychology and theology. His interest in this interdisciplinary dialogue culminated in several fascinating associations. In addition to the New York Psychology Group, Tillich was involved with the Harvard Project on Religion and Mental Health from 1957 – 1961 and later the Academy of Religion and Mental Health, to name but two. Tillich also wrote extensively for the *Journal of Pastoral Psychology* and wrote several chapters in various publications on religion and mental health between 1957 and 1962. He served on the board of the Review of Existential Psychology and Psychiatry in the early 1960's and gave numerous lectures to psychological organizations. Tillich also had a long-standing association and friendship with American existential psychologist Rollo May²⁴.

Although Tillich had been interested in psychology, particularly Freudian psychotherapy prior to WWII, Allison Stokes comments that, "an intensified interest, knowledge, sensitivity and commitment to issues of religion and health, pastoral psychology, theology and counseling can be discerned in Tillich's post NYPG publications".²⁵ This intensified interest is further corroborated by Dr. Earl A. Loomis Jr., a colleague of Tillich's at Union Theological Seminary, who made the following comment on Tillich's efforts to incorporate psychological theory into his own thinking:

²⁴ Rollo May had been a student of Tillich's at Union Seminary in New York. Tillich supervised May's doctoral dissertation that was published in 1950 as *The Meaning of Anxiety*. May started attending sessions of the New York Psychology Group in the later years of its existence. There has been much speculation as to whether Tillich's most psychologically oriented publication, *The Courage to Be*, was in fact written as an answer to Rollo May's book *The Meaning of Anxiety*. Although May claimed it was, many Tillich scholars disagree. There has also been much speculation as to whether Tillich had ever undergone any psychoanalytic treatment. During a lunch meeting on October 17, 2003 in New Harmony, Indiana (where Tillich is buried) with longtime Tillich friend Mrs. Jane Owen, I was informed that Tillich's wife Hannah had undergone a course of psychoanalysis with Rollo May but she was unsure whether Tillich himself had. Rollo May is said to have undergone a period of psychoanalysis with fellow NYPG member Erich Fromm.

²⁵ Stokes, 118.

the effort to assimilate and accommodate himself to psychoanalysis was a difficult one for Tillich, as for many others of his time. Persisting, his curiosity eventually was rewarded and the interchange that grew out of his close alliance with analysis and analytic thought was enduring. In time he came to speak and write as one who had seen the problems and the conflicts, one who had experienced the drives and defenses, one who had struggled with the resistances and the transference. Eventually the familiarity became deep and lasting.²⁶

In addition to the numerous articles, book chapters and active working associations Tillich had with psychology following WWII, his continued influence on contemporary psychological theory attest to the wide interest and relevance of his thought.²⁷ Chapter five provides a further illustration of Tillich's relevance to contemporary theory when his concepts of faith as ultimate concern and the courage to be are super-imposed on debates about the aim and purpose of psychological theory within critical psychology.

Between 1941 and 1945, however, the NYPG was a forum in which Tillich listened to, absorbed, debated and analyzed questions about the relationship between psychology and theology. While the NYPG met for nearly five years and included an illustrious membership, very little is known about it, the discussions that took place or the significance of such a gathering. Tillich was on faculty at Union Theological Seminary during the years the group met and his participation in the group represents his first serious engagement in the dialogue between psychology and theology. So much of Tillich's later writings and sermons, for both psychological and theological audiences, would reflect deep and profoundly astute observations about human existence. Although

²⁶ Stokes, 118.

²⁷ Perry Lefevre's book, *The Meaning of Health* (Chicago: Exploration Press, 1984) is an edited selection from Tillich's vast number of published articles on the topic of psychology and theology. In addition to the many references existential psychologist Rollo May makes in his books to Tillich's thought, Kirk J. Schneider's *Rediscovery of Awe* (St. Paul, Minnesota: Paragon House, 2004) and Robert A. Emmons' *The Psychology of Ultimate Concerns* (New York: The Guilford Press, 1999) are just three examples of Tillich's continued influence and relevance on contemporary psychological writers and theorists.

much of that astuteness came from Tillich's own personal struggles²⁸ in addition to his always considering himself on the boundary intellectually with several disciplines, one can trace strong influences from the NYPG in many later writings and associations with psychologists. Reading through the minutes and papers of this group, one is struck by how little Tillich in fact spoke. However, his regular attendance and the comments he did contribute during meetings leave one with a very strong sense that Tillich was keenly present and soaking in everything that was being said.

The depth and substance of the questions raised and answers debated between psychologists and theologians in the NYPG is a remarkable illustration of interdisciplinary discussion. Not only do these materials provide a valuable contribution to the history of religion and mental health in the United States, the conversations that took place during the NYPG meetings also explore some profoundly important questions that continue to resonate today about the role of psychology and what in fact constitutes psychological health and development. Further, members of this informal yet illustrious monthly gathering were acutely aware of world events and the impact these events had on discussions about human nature and development. Many of the discussions centered on the necessity and value, if not urgency, of this particular interdisciplinary dialogue in light of these events. Members also debated which side - psychology or theology - was better equipped to deal with the effects these global changes were having on individuals.

²⁸ I thank Matthew Lon Weaver, member of the North American Paul Tillich Society and co-author along with Ron Stone of *Against the Third Reich: Paul Tillich's Wartime Radio Broadcasts into Nazi Germany* (Louisville: Westminster John Knox Press, 1998), for our many conversations over the years about Tillich's role as military chaplain in Germany during WWI and his subsequent emotional breakdowns during that time. Further, Tillich's daughter, Mutti Tillich Ferris has claimed that her father suffered post-traumatic stress disorder following WWI. A state, she feels, he never fully recovered from. And finally, although highly controversial amongst Tillich scholars, Hannah Tillich's (Tillich's wife) publication of *From Time to Time* (Chelsea Manor, Michigan: Stein & Day Publishers, 1974) also makes reference to Tillich's psychological distress after WWI. In addition, Hannah Tillich mentions her husband's keen interest as the years went on with psychology and his associations with psychologists and psychoanalysts.

In the final year of the group's meetings, Dr. Grace Elliott described the necessity of theologians and psychologists coming together not only to learn from each other, but also perhaps to place what she called "the real perplexities in our own fields"²⁹ into greater context.

Bringing psychologists and theologians together amidst the backdrop of WWII fostered further discussions about ethics, social responsibility, human nature, love, and the care for others. Members of the NYPG often described the period in which they were living as desperate. Whether they were theologians or psychologists, there was a unanimous belief that the world was undergoing rapid and profound change. The results they felt were visible and increased signs of anxiousness, apathy and a sense of meaninglessness among the population. These psychological and spiritual signs of change were witnessed in therapy sessions and amongst congregations. A growing sub-text running through the group's discussions was that institutions and ideologies which had seemingly provided social, and by extension, personal stability, in the past were now crumbling. As Tillich suggests in the opening quotation to this chapter, "only when an earthquake shakes and disrupts the surface of our self-knowledge...are we willing to look into a deeper level of our being". Members of the NYPG were not engaging in passive intellectualizing; the discussions reveal shifts and struggles with personal ideology and a desire for action.

Members often conveyed, as mentioned, a sense of urgency about the time in which they were living and that meant realistically assessing what psychologists and ministers could provide in these "desperate" times. Dr Grace Elliott stated,

²⁹ Grace Elliott, Minutes of the New York Psychology Group, February 9, 1945. I am relying on the date of discussion to document quotes from members as the full minutes and papers of the NYPG are organized by year and not numbered by page.

In these desperate days [he] has a new urgency to [his] ever present question, Why was I born? What is the meaning of life? How can I discover it? But [he] cannot be given that answer as a legacy, a gift, a favor – even from God. [He] has to find it, achieve it, work it out for himself. [He] cannot escape that responsibility...My quarrel with the theologians is that too often they have paid little attention to the process, that they have thought they could preach or exhort or argue or persuade men and women into the Kingdom of Heaven. On the other hand my quarrel with the psychiatrists is that too often they won't admit that [man] cannot be whole without finding for [himself] those values, those goals, and that sense of direction which give meaning to life and security for its risks. Those helped by them may be all dressed up with no place to go, while the minister's clients know where to go but haven't any idea how to get there. We must work together both on goals and on understanding the conditions for their achievement.³⁰

As we will see in later chapters, comments such as these are fascinating in light of the philosophic and therapeutic approach Viktor Frankl will present to the United States a decade or so later and they will resonate profoundly with Alfred Längle's contemporary theory of Existential Analysis. Members of the New York Psychology Group assumed that fostering dialogue between psychology and theology was not only necessary to better grasp human development and potential, it was also seen as necessary for responsible action in the world. Assuming the inextricable link between individual and social or cultural development, the group's members, particularly the most vocal - Erich Fromm and Seward Hiltner - reflected their own intellectual background and influence from groups such as the Frankfurt school of critical theory in the 1920's and the pastoral counseling movement in the United States. This sense of social urgency assumed that both psychologists and theologians had active, integrative roles to play.

Throughout this thesis, the problem with psychology and its perceived limited scope are illustrated in the various dialogues that took place mid-twentieth century between psychology and theology in the United States. Underlying so many of these

³⁰ Grace Elliott, NYPG, February 9, 1945.

mid- twentieth century dialogues was a view of human nature as complex, ambiguous and requiring an interdisciplinary lens for appropriate study. Further, underneath these larger questions about human existence, we see illustrations of the impact the integration of psychological theory and education had on theologians and seminaries in the United States. While many theologians, like Tillich, made genuine efforts to integrate psychological perspectives into their theological language, many also began a critical examination of the degree to which psychology could effectively analyze and answer questions about human nature. The critical examination of psychology would be taken up again, albeit from different perspectives, by humanistic and existentially oriented psychologists during the late 1950's and 1960's, and re-emerge in the last two decades in post-modern approaches such as critical psychology. In the 1940's, theologians who engaged in this kind of interdisciplinary dialogue were well aware of psychology's growing influence and on one level were keen to integrate psychological and social scientific advances into their own perspectives on human nature. On a very practical level, many involved in pastoral counseling and training in seminaries were eager to upgrade or modernize approaches to counseling in order to provide prospective ministers with more relevant therapeutic tools when dealing with parishioners. On the other hand, many were assessing the impact psychological theory had on society generally and questioned whether a scientific and methodological approach (often referred to in the NYPG group as a deterministic approach) to human nature could effectively analyze issues of faith, meaning, values and ethics; indeed, whether psychology could effectively analyze existential questions. Which side was better equipped to deal with these or was there some common ground between the two? When the NYPG began meeting in 1941,

the psychologists and theologians within this unique group were in agreement that an interdisciplinary dialogue was the most fruitful approach. The desire was to re-structure theoretical passivity into possible concrete action at the therapeutic and ministerial levels.

The New York Psychology Group

Because very little is known about the NYPG, it is difficult to fully reflect on the importance of this group based on the materials available. The minutes and paper presentations from the group's meetings do, however, warrant serious attention and much more scholarly work needs to be done to analyze the various contexts that influenced the group's creation and the substance of their debates.³¹ It is somewhat surprising, given the illustrious membership and the dedicated interest members had in the intersection between psychology and theology that so little is known about the NYPG. Founding member Seward Hiltner recalls an informal agreement among members not to discuss the meetings although this did not imply the meetings were considered private. Further, the existential psychologist Rollo May (who was a graduate student at Union Theological Seminary when he joined the group) would later comment when being interviewed by Allison Stokes that it was only in hindsight that the importance and significance of the group's meetings and discussions became apparent.³² The following six general comments about the group give us a good start, however.

³¹ As stated, Terry Cooper and I hope our interest and attention to the NYPG through our respective publications with Mercer University Press will generate for other scholars a desire to explore the NYPG even further.

³² Stokes, 113. Stokes interviewed both Seward Hiltner and Rollo May when she was conducting research for her book, *Ministry After Freud*. Stokes also points out that Rollo May never mentions Tillich's participation in the group (I assume she is referring to May's book, *Paulus*. Hannah Tillich, who was present with her husband at the NYPG meetings, is also silent about Tillich's participation in the group in her book *From Time to Time*).

First, founded by Seward Hiltner, widely known in pastoral counseling circles, and social psychologist Erich Fromm, the NYPG's membership, by invitation only, was comprised of psychologists, psychoanalysts, medical doctors, theologians and graduate students. Many members were on faculty at Union Theological Seminary or Columbia University, many others were Freudian or Jungian analysts in private practice in New York. Prominent members included: theologian and hospital chaplain Otis Rice, theologian and pastoral counselor Seward Hiltner; Paul Tillich, of course; along with fellow Union Seminary Professors David E. Roberts and Thomas Bigham. The psychiatrist Gotthard Booth and social psychologist Erich Fromm were joined by the humanistic psychologists Carl Rogers and Rollo May, Freudian analysts Ernest Schachtel and Greta Frankley and, Jungian analysts Frances Wickes and Martha Glickman. Membership in the group changed somewhat from year to year, but the members mentioned here represent a portion of the core group that remained intact throughout the period 1941 – 1945.

Many members of the NYPG, as mentioned, were European émigrés who brought an array of familial, cultural, political, religious and educational backgrounds to bear on the monthly discussions, especially in light of the war raging in Europe. Stokes identifies the NYPG among the “liberal intelligensia”³³ rising in the U.S. at this time. “Liberal intellectuals maintained that sharing human diversity offered a more authentic, reliable, and satisfying perspective than did narrow parochialism”.³⁴ Stokes adds,

“The one thing group members held surely in common was their liberal, intellectual style of thought. Indeed, if the secular liberal intelligensia can be said to have had a *religious* counterpart in these years, most members of the NYPG belonged to it, and Tillich,

³³ Stokes, 136.

³⁴ Stokes, 137.

Hiltner, Roberts, and May were among its nationally prominent leaders”.³⁵

Within this liberal group, members of the NYPG represented secular and religious (both Christian and Jewish) perspectives, in addition to a variety of professions and theoretical positions. Women comprised a large number of the prominent members. Not only was the group distinctive in bringing psychology and theology together in discussion, the strong membership of professional female analysts further attests to this striking group.

Second, Allison Stokes has suggested that the group should be seen as an important historical contribution to what is very loosely referred to as the religion and mental health movement taking place mid-twentieth century in the United States. Indeed, many members would continue to be affiliated with similar interdisciplinary groups for several decades to follow. Founding NYPG member Seward Hiltner and theologian Paul Tillich, for example, would later be involved in the Harvard Project on Religion and Mental Health beginning in 1957 and then as members of the Academy of Religion and Mental Health in the early 1960's. Reverends Otis Rice and Thomas Bingham would also become involved in the Academy of Religion and Mental Health. Gotthard Booth M.D. would be involved in the Harvard Project on Religion and Mental Health and would contribute chapters in several books published in the late 1950's on the subject of religion and health³⁶. Stokes adds, “that these particular individuals met at this particular historical moment is a fact of incalculable importance for the growth of religion and health. What had been a small movement before the war blossomed beyond expectation

³⁵ Stokes, 138.

³⁶ Booth contributed chapters, for example, in Simon Doniger, ed. *Religion and Health* (New York: Associated Press, 1958) and Simon Doniger, ed. *Healing: Human and Divine* (New York: Associated Press, 1957). These particular publications also include contributions from original NYPG members: Paul Tillich, Seward Hiltner and Carl Rogers.

in the postwar era, partly as a result of their intellectual effort and influence.”³⁷ Further, “the New York Psychology Group essentially functioned not to break new conceptual ground, but to explore the interrelation of religion and health by providing a forum for intellectual exchange and fellowship.”³⁸

Third, the group’s discussions are not only an important illustration of interdisciplinary dialogue between psychology and theology, they illustrate how such dialogues are grounded in, and influenced by, historical and cultural context. Blending two perspectives to discuss human nature and human development was simultaneously influenced by world events and a sense of global urgency. Stokes writes, “the world war was ever a part of the group’s consciousness...their experience of disruption [many being European émigrés] and displacement intensified the group’s awareness of global warfare and strengthened the predominant sense that intelligent and informed discussion of the relationship between depth psychology and theology was urgent.”³⁹

Fourth, from a theological and pastoral counseling perspective, Seward Hiltner would later comment to Allison Stokes that the rapid rise of psychology and secular counseling had an impact not only on the role and nature of pastoral counseling but that psychology’s rise in importance would increasingly impact the “therapeutic” obligation ministers and pastors were increasingly requested to dispense. Interestingly, the rise and integration of psychological theory, language and terminology would, however, mean that the therapeutic intervention undertaken by a minister or pastor would also be scrutinized more carefully under this new psychological perspective.⁴⁰ Scrutinized more

³⁷ Stokes, 115.

³⁸ Stokes, 113.

³⁹ Stokes, 117.

⁴⁰ Stokes, 109.

carefully by those in charge of seminary schools as well as parishioners who themselves were increasingly influenced by, and internalizing, this new language and its perspectives on human nature, behavior and emotion. A prevailing perception of secular psychology's growing influence on culture generally would be absorbed within theological and pastoral counseling circles. The psychological lens of "scrutiny", as Seward describes, would continue well into the 1950's when Hans Hofmann of the Harvard Divinity School became head of the Harvard Project on Religion and Mental Health and would place a priority on addressing not only the kind of psychological training ministers and pastors received in seminary schools but also the kind of personal psychological analysis ministerial students were expected to undergo and complete in order to better serve (therapeutically) their parishioners, and by extension the community.

Fifth, the NYPG did not have a set mandate nor was it affiliated to a specific university, religious or government institution. Although many of the theologians in the group, for example, were on faculty at Union Seminary and reflected a strong politically liberal and Protestant stance, the group discussions were not guided or organized by any specific external body. The informality of the group's discussions, therefore, is apparent when one reads through the minutes. The material is profoundly rich and yet sometimes confusing, the debates are both riveting and disorganized. Amidst the contradictions in arguments made by members throughout the years, one detects a strong and natural progression of shifting positions, a real working through both intellectually and personally around some fairly profound questions about human nature, capability and potential. It is precisely this character, the combination of theoretical debate and personal sentiment, that makes the minutes of the NYPG so compelling.

Sixth, given the rather illustrious cast of characters and their respective contributions to psychology and theology, there are numerous ways and approaches with which one could analyze the material. What is most striking about the material is in fact the constant, often overwhelming, amount of questions the participants raised. It would seem that the group provided a non-judgmental arena to ask profound questions about existence and about the strengths and weaknesses of both psychology and theology without feeling that answers needed to be provided or found. One gets a sense in fact of the enthusiasm participants had for the process itself, a profound feeling that an open questioning without too many theoretical boundaries would provide much creative food for thought. And indeed, the material does just that.

Introducing The Discussions

Members of the NYPG took turns hosting the monthly meetings. During the years 1941 – 1945 the group's meetings and subsequent discussions were organized around four themes: The Psychology of Faith, The Psychology of Love, The Psychology of Conscience and The Psychology of Help (or the function of psychological help). Each meeting began with a pre-selected paper given by a member. These presentations were then followed by an open discussion amongst all members present. Tillich attended nearly all the meetings during these years and gave three papers: "The Concept of Faith in the Jewish-Christian Tradition" (1942), "Fragments of an Ontology of Love" (1943) and "Conscience – Historical and Typological Remarks" (1943).

The four main themes provided overall structure but discussions frequently centered on the relationship between ethics and psychotherapy, for example. Was

psychoanalysis in the “business of ethics”? This question was hotly debated with Tillich emphatically claiming that it certainly was while other members, specifically psychologists, claiming psychology had no business being engaged in ethics. Other questions debated included: what were the differences between the ethics an individual adopts (what was perceived to be meaningful and valuable) and the ethics an individual lived by in conjunction with the wider society he or she inhabited? The following statement given by a member during a meeting in 1944 conveys the idea that our individual experiences and notions of mental health and inner fulfillment are also inextricably linked to social frameworks or collectively shared notions: “a person’s ethical achievements and judgments are set within a framework which is not completely at [his] own disposal, so that wisdom, mental health, inner peace for every individual are partly dependent upon [his] own initiative and partly upon [his] coming to terms cooperatively with structures and truths that [he] did not create and does not sustain by any effort of [his] will...”⁴¹

Further, many questions that the group raised sound surprisingly familiar in today’s therapeutic settings: were there differences in the therapeutic approach based on the religious, social or cultural context of the client? What was the aim of psychotherapy and what therefore were the implications of theory and therapy beyond the individual? What were the expectations of the client, what kind of “help” did they want and feel they needed? And by extension, what was the so-called “client” internalizing about the process and nature of therapy itself?

Underneath the discussions and despite the commentary by one member that “values” were not at play in the main mandate of the group, the NYPG was in fact

⁴¹ Dr. David E. Roberts, NYPG, January 14, 1944.

advocating an “ultimate concern” (to borrow a Tillichian phrase) for the welfare of all. Within the interdisciplinary and intellectual nature of the discussions, a 1943 meeting debated whether an ideological concept advocating the unity of humankind could develop into a reality.⁴² One can easily argue, as we shall see in chapter five, that these same questions of ultimate concern dominate many contemporary discussions in psychology, albeit without reference to, or dialogue with, history or religion.

During the years the NYPG met, natural shifts occurred in the emphasis members placed on either psychological or theological perspectives. The meetings during the first year focused on discussions about the psychology of faith and heavily favored, not surprisingly, a psychological (and social scientific) approach, if not bias, to the issue of faith. During the group’s final year in 1945, however, discussions about the psychology of help were far more philosophical about psychology’s perceived limitations to deal with issues concerning the meaning and value of human existence in addition to the recognition that those seeking therapeutic intervention were often seeking direction, counsel, wisdom and guidance on issues that were not necessarily categories of psychic illness but profound questions of existence.

Also of interest, given the historical context and world events of the time, is the general tone of the group’s discussions. Discussions were often dominated by contrasts of positive and negative behavior and an underlying subtext advocating universal values, and positive ones at that, is quite apparent. Whether members spoke from a psychological or theological perspective, the group frequently formulated their discussions around such issues as love, responsibility, freedom, relation, community, solidarity, the differences between individual and cultural development, and ethics.

⁴² General discussion, NYPG, June 4, 1943.

Always questioning whether such topics could be presented as universal, if not essential, human capacities for many of these, the group discussed what could be seen as ideals of human progress. Therefore normal or rational faith was contrasted with “pseudo-rational” faith and emphasis was placed on being able to clearly identify what was rational faith and what was irrational. Positive and creative behavior went up against possessive and destructive behavior. Healthy expressions of solidarity and community were contrasted with irrational authority or possessive, destructive and dominating power.

While members within the psychology camp often emphatically distinguished their own discipline as a relatively value-free enterprise from theology that was labeled value-laden, the group as a whole was generally in agreement about ideal directions for human progress and psychological and spiritual health. These themes were predominantly: love, solidarity, community, freedom and responsibility. The question was how could these “positives”, how could these valued ideals be reinforced in psychology at the individual level and theology at a more societal level, and further, how could they be internalized by the general population. The assumption was that if these valued ideals could be clearly identified, upheld and expressed both individually and culturally, the world would in fact be a better place. Could psychology and theology, together, bring this about?

What follows is a summary of the open-ended questions which marked the debates amongst members particularly during the “psychology of faith” meetings which took place from December 1941 – May 1942 and the “psychology of help” meetings held between October, 1944 to March, 1945. Of importance to this thesis is the fact that many

of these questions continued in discussions between psychologists and theologians through the 1950's and early 1960's and have re-emerged in post-modern theories such as critical psychology and contemporary therapeutic approaches such as Alfred Längle's Existential Analysis. Equally important to this thesis is that theologian Paul Tillich was deeply influenced by these discussions and hence the chapter also serves to place in context Tillich's burgeoning interest in psychology and the impact this had on his subsequent writings about human nature.

The Psychology of Faith

The opening session of the New York Psychology Group took place on December 5, 1941. Having established that the first series of meetings from December 1941 to May, 1942 would discuss the psychology of faith, the group introduced its first open questions for debate. Could faith be considered an attitude, an attitude of the whole personality? Was our subjective experience of faith different from faith in God? Could faith be validly explored from biological, sociological and psychological perspectives? Is the content of one's faith linked to the culture of which one is part? More specifically, is faith an inherent part of human life: "If there is life", Seward Hiltner asked, "is there faith"⁴³? Does faith presume action? In other words, if I have faith, will I act and, perhaps more importantly, will that act be positive and creative? Did faith, in other words, presume human potentialities for virtuous behavior and action? Is faith best studied from the standpoint of emotion? Is faith the deepest level of emotion? How much consideration needs to be given to the "object" of one's faith? Can variations in

⁴³ Seward Hiltner, NYPG, December 5, 1941.

faith be distinguished? Can one clearly distinguish between rational or genuine faith and what Erich Fromm called “pseudo”⁴⁴ or irrational faith?

In the meetings that followed, these ideas and questions were explored further. The questions that framed the first sessions were, as mentioned, predominantly psychological. Many of the questions were placed in the context of personality structure, emotions and the ability to observe and categorize not so much the object of one’s faith but faith as object. The following is worth highlighting from the first year the NYPG met: the idea of faith as an attitude; that faith is related to social structures versus divine realms; and that faith implies interdependence, an I - thou relation.

Faith was predominantly discussed as a specific attitude of the whole personality. At the subjective level faith, and rational faith at that, was described from the standpoint of personality structure. Mirroring in many ways characteristics of psychological health, psychologists in the group discussed faith in terms of specific characteristics an individual would possess. These included firmness in one’s state of mind, certainty, balance, dignity, integrity, courage, the ability to love, steadfastness, and freedom. Psychologists in the group contended that an individual who possessed these internal characteristics was likely to experience the world as positive. Further, these positive and “healthy” personality traits, they believed, predisposed an individual to adopting an attitude of faith and hope about human beings and the world itself. The psychologists within the group re-directed theological discussions about the object of one’s faith or receiving the ability for faith through a divine source to an emphasis on human capability and experience based on internal characteristics, personality structure, and attitude. Erich Fromm reiterated his secular psychological position stating that rational faith “is one

⁴⁴ Erich Fromm, NYPG, December 5, 1941.

where the weight is upon the active experience of the individual and not on his receiving the gift of grace from God or any authority”.⁴⁵

While Fromm, like many other psychologists within the group, placed rational faith within the confines of individual personality structure, there was an underlying assumption that an individual who possessed these psychologically healthy characteristics was essentially free and responsible and would carry the right attitude out into the world. Faith derived from a healthy personality structure engendered the right attitude that assumed in turn, right action. This is quite interesting in light of dialogues between psychology and theology to come in the decades that followed. On the heels of the Harvard Project on Religion and Mental Health (1957 – 1961), the Rev. Harry C. Meserve of the Academy of Religion and Mental Health would outline the characteristics of a healthy “religious” person. These included: “a realistic attitude towards the tribulations of the world”; and an approach towards people and the world generally that was “expectant and hopeful, rather than critical and negative”.⁴⁶

In summary, given the heavy emphasis on psychological interpretation in the first year the NYPG met, faith did not lead to psychological health, rather, psychological health and wholeness predisposed an individual attitudinally to the right kind of faith and rational faith specifically. This healthy individual, embodying an attitude of faith would, it was assumed, act justly and ethically in the world.

In the final meeting of the first year in May 1942, several comments were made about faith in external social structures and ideologies. With the events in Europe clearly on the minds of members present, Erich Fromm stated that he believed rational faith

⁴⁵ Erich Fromm, May 20, 1942.

⁴⁶ Richard V. McCann, *The Churches and Mental Health*, (New York: Basic Books, 1962), 6.

could not be faith in evil.⁴⁷ In his opinion, stating that one had faith in the ideologies of a political dictatorship, for example, was not rational faith. Ruth Benedict took Fromm's comment one step further at this same meeting and asked the provocative question of whether faith was even possible "when the social order is chaotic"?⁴⁸ In other words, was an individual even capable of an attitude of faith if the external world in which the individual participated and was influenced by was not itself stable. How stable were these internal personality traits? Weighing the influence of and link between the social world and the individual, Benedict answered her own question by suggesting that there were in fact distinctions between personal and social experiences of faith and that examples could always be drawn when individuals had the ability to exhibit faith despite difficult circumstances or occasions of social chaos and upheaval. This is an interesting commentary given Viktor Frankl's position after the war about an individual's capacity to adopt a unique and profoundly personal attitude, based on individual freedom and decision, in moments of great tragedy, turmoil and despair. The NYPG materials provide fascinating glimpses into an ongoing debate about whether there are essential human characteristics, the degree to which we are self-made, socially constructed or a complex combination of all three.

Rational faith also assumed relation. Faith involved both the internal and highly subjective attitudes and emotions of the individual but was simultaneously directed towards an object and that in turn implied the relational quality of faith although the psychologists continued to deny any theological similarity with a human/divine relation. Harry Bone commented during the February 1942 meeting that faith "is experiencing life

⁴⁷ Erich Fromm, NYPG, May 20, 1942.

⁴⁸ Ruth Benedict, NYPG, May 20, 1942.

with one's whole self, as worth living. It is the normal and inevitable outlook of a healthy personality; that is, one who is realizing in significant degree his whole self, sensuous, emotional, intellectual. This faith in the structure of life, faith in the possibilities of human nature, faith in one's fellows, faith in oneself, faith in life, faith in the world – are all aspects of one indivisible life attitude”⁴⁹. The attitude Bone spoke of, an open attitude of faith in the possibilities of human capability, the possibilities of human relation and community was taken up by Erich Fromm when he stated that “the essential problem of [man] is not that of frustration and satisfaction of needs but of [his] relatedness to others in the world and the necessity thereof. Otherwise, [he] dies spiritually, i.e. becomes insane”⁵⁰. Rational faith was not only an internal subjective experience, rational faith prompted positive, relational experiences in the world. Further, an attitude of faith in our human potential made a positive statement about community and fellowship and this was linked once again to psychological health and development. Individuals needed relation to be healthy. Unconsciously, many psychologists in the group were advocating a philosophical stance about faith in community, in each other, in life itself, and attempting to link positive community and relational action as a criterion for psychological health.

Having faith that life itself was worthwhile and meaningful meant for Harry Bone that the world was experienced and perceived subjectively as supportive, stable and reliable. This sparked numerous debates once again as to whether we inherently have faith and belief in a structure of reality prior to our immediate subjective experience and experiences of the social structures that surround us, especially when those structures are

⁴⁹ Harry Bone, NYPG, February 6, 1942.

⁵⁰ Erich Fromm, NYPG, February 6, 1942.

chaotic and destructive. Members debated “where the future trend of faith [would] go”.⁵¹ Reflecting global instability, Elizabeth Rohrbach suggested, “where faith has torn loose from old symbols, something else has risen up to take their place, i.e. the state, the supernatural”.⁵² Members discussed the shifting objects that symbolized relatedness, whether they be ones towards which human beings deliberately orient themselves or from which experiences of faith and trust are born. Seeing faith as possibly unstable implied that there was no stable source of relatedness and one can sense within these discussions personal struggles of faith taking place within members who were simultaneously attempting to analyze the world situation.

But faith would, according to theologian David E. Roberts, necessarily fix on something that symbolized relatedness⁵³ and this relatedness would in turn be perceived and experienced as supportive and trustworthy. Rollo May commented during the May, 1942 meeting that “to understand who this individual is who is free and spontaneous, we must consider this individual’s relatedness to something other than [himself]. Certainly [he] must be related to [his] fellow man. Beyond that [he] must be related to some structure of meaning. [He] is spontaneous as [he] is able to express in [himself] the reality of human experience more than the immediate situation. We reach the religious when we move beyond the culturally conditioned individual to the structure of reality, the universe in which he lives”.⁵⁴ May presumed that human beings have the capacity to express, and indeed they are always expressing, a reality that transcends the immediate, the tangible, and the explainable. Raising once again the possibility of a structure of

⁵¹ David E. Roberts, February 6, 1942.

⁵² Elizabeth Rohrbach, NYPG, March 6, 1942.

⁵³ David E. Roberts, NYPG, Feb. 6, 1942.

⁵⁴ Rollo May, NYPG, May 20, 1942.

meaning symbolizing relatedness that was prior to our immediate senses, May's opinion, like that of many NYPG members, reflects very personal and professional alliances. May's combined existential psychotherapeutic and theological position is clear in his statements about what lies beyond our immediate senses and knowledge.

Although members often agreed in general discussions, differences between theologians and psychologists appeared rapidly when they came close to conclusions. Fromm suggested that the church had essentially failed in providing a symbolic expression of the solidarity of [men]".⁵⁵ Different symbolic forms would emerge, Fromm contended, and clearly outlining his position, he suggested that what might very well emerge was "a society of [mankind] in which the solidarity of [men] would find expression in the social organization".⁵⁶ In a later meeting, however, Harry Bone would counter Fromm's own "faith" in social organizations by suggesting that our limitations as human beings "are often rooted in the social structure and become part of our own mental equipment. Rather than think in terms of society or culture as some entity, the point is that if one takes social solidarity seriously, [his] faith has to be limited, or the problem of achieving it has to be limited, by the situation of all [his] fellows".⁵⁷ This raised the familiar issue as to whether human beings do in fact experience faith from an experience of trust in a structure of reality that is prior to social organizations we actively create and are influenced by.

What is interesting is that in either case, theological or secular psychological positions, members of the NYPG collectively felt and conveyed the idea that faith was a belief in certain ethical principles and fundamental human ideals. When discussions

⁵⁵ Erich Fromm, NYPG, March 6, 1942.

⁵⁶ Fromm, March 6, 1942.

⁵⁷ Harry Bone, NYPG, March 20, 1942.

turned to the question of whether there was a difference between “faith as a human attitude” and “faith in God”, Paul Tillich stated that he did not believe “that the alternative was between God and self-discovery”.⁵⁸ “If one describes the existential situation of [man], one cannot do it all in inner psychological terms”, Tillich stated, “because the very character of the existential self is standing face to face with our ultimate meaning under the threat and fear of losing one’s existence. Even if we go as far as possible with those who say that faith is the discovery of self, the element of discovering something beyond one’s self is involved”.⁵⁹ Tillich suggested that what we must do is symbolize our inner experiences but then what would the right symbols be? The symbols, Tillich suggested, had to express something ultimate and unconditioned as opposed to ordinary and conditioned and the criteria would be universality.

These discussions extended to lengthy debates over concepts of self, spontaneity, attitude and freedom. Members discussed the inherent difficulty in defining any of these terms and how they could be applied. Harry Bone aptly suggested that these discussions “remind us that the real issues of life are not verbal and intellectual – they are problems of action involving the whole personality”.⁶⁰ Rollo May continued to argue his position in later meetings that defining faith from a centered self was difficult because “faith in one’s self and in others involves faith in a structure of reality”.⁶¹ The idea that faith and trust is contingent upon our experience of a structure of reality that holds or binds us was furthered by Grace Elliott who suggested that we also depend on such a structure. The experiences of both dependence and trust in turn lead to our ability to be spontaneous, to

⁵⁸ Paul Tillich, NYPG, January 9, 1942.

⁵⁹ Paul Tillich, January 9, 1942.

⁶⁰ Harry Bone, NYPG, March 20, 1942.

⁶¹ Rollo May, NYPG, March 20, 1942.

let ourselves go and respond freely with an attitude that corresponds to a centered and authentic self.⁶² In other words, a positive attitude of faith towards self and world that engenders ethical and relational behavior naturally flows from experiences of dependence and trust.

Whether this “structure of reality” was identified as God or left rather ambiguous, Tillich would see the reality of human existence as ambiguous and paradoxical in part because of the circular character of faith itself. Therefore faith for human beings, according to Tillich, was in part an acceptance of this ambiguous reality. Faith was an experience of union in spite of the ambiguity (the ambiguity of dependence and trust, of individual and social experience) and not an overcoming of this reality of human existence. “Faith”, Tillich stated, “implies the experience of a paradoxical, transcendent, unconditioned order, which to accept is the fulfillment of our being”.⁶³ Faith as union despite the paradoxical nature of human existence had a transforming quality to it. Much like the psychologists in the group, Tillich equated faith as an act of acceptance and attitude inextricably related to health and healing. Healing, for Tillich, was living in the paradoxical order. To say that one’s life was fulfilling was to accept the unity of finiteness and infinity, the unity of paradoxical reality and possibility.

Psychology for Tillich, was the “context of the conditioned relation, the earthly, immanent experiences of our soul”.⁶⁴ This context limited psychology, according to Tillich, because healing and the positive development of humankind resided in the midst of our human capacity for faith and symbolism, or our capacity to experience moments of

⁶² Grace Elliott, NYPG, March 20, 1942.

⁶³ Paul Tillich, *The Concept of Faith in the Jewish Christian Tradition*, paper given during the meetings of the NYPG on April 10, 1942.

⁶⁴ Paul Tillich, *The Concept of Faith in the Jewish Christian Tradition*, April 10, 1942.

psychological unity within our experiences of faith and acceptance. “Being”, Tillich commented, “has always some mystery in it which cannot be expressed in scientific terms or anthropological terms or ethical terms and appears in manifestations of symbolic character – love, justice, truth, etc.”.⁶⁵ Where would love and freedom, in their unconditioned character, as Tillich referred to it, be rooted if not in immediate and conditioned social structures?

As the first year of meetings came to a close, it was obvious that discussions of faith, whether related to individual experience, conditioned by social structures or whether alluding to a transcendent or religious realm, all took place in the context of catastrophic world events. Is it any wonder then that much discussion was spent on distinguishing authentic from irrational faith? And further, that the definition of rational faith the group proposed involved ideals of healthy personality, ideals of relation, community, fellowship and love. Faith, regardless of the disciplinary bias, meant positive action and ethical behavior. Amidst the divisions between psychologists and theologians over social versus divine realms, all the members advocated a strong universal faith that is clearly evident and succinctly summarized by Martha Glickman in the spring of 1942. She stated, “if each were to examine the reasons why [he] came into the group and spent so much time and effort, it would not be a question of faith in certain values nor of whether [he] believed in God or not. It would rather be to gather insights from all of these divergent points of view to implement [his] faith in this critical hour in which we are living. But we must not rest content with discussion; the possibilities of activation are many and varied”.⁶⁶ Glickman assumes that faith was an essential human

⁶⁵ Paul Tillich, NYPG, May, 20, 1942.

⁶⁶ Martha Glickman, NYPG, May 20, 1942.

characteristic and expression that both psychologists and theologians took for granted.

The members of the NYPG, each shaken by world events, sustained through dialogue and relation, upheld an ideal of human potential through faith.

The Psychology of Help

How do our ideals of relation and community, if not faith, extend to the manner in which we treat each other? Is the function of help inherent to human beings? In the opening session of the “psychology of help” meetings that began in October 1944 and concluded in March 1945, Erich Fromm proposed that “helping” was in fact “the most basic human function that exists”.⁶⁷ Further, “one might think of the fact that [men] need relatedness to others as a matter of existence, that they cannot live without the help that they derive from the very presence of another human being”.⁶⁸ Fromm believed that the act of helping was a basic component of being human and implied a level of ethical relatedness to one’s fellow human being. But Fromm also believed this basic human quality was being culturally negated. Fromm’s strong stance pertaining to the power of the social order shifted somewhat during the final years the NYPG met. Fromm believed “our culture so far has been far away from the idea of human help as part of the normal social process”.⁶⁹ Again, witnessing the very real breakdown of societies in Europe affected what members discussed and how subjects were categorized. There was a schism between what was perceived (if not hoped) to be a human being’s essential nature

⁶⁷ Erich Fromm, NYPG, October 20, 1944.

⁶⁸ Erich Fromm, October 20, 1944.

⁶⁹ Erich Fromm, October 20, 1944.

and the collapse of social and cultural structures that were blamed for not fostering these innate traits for just fellowship and relationship.

Fromm's opening statements at this first meeting on the psychology of help are quite fascinating. The group's discussions had clearly made shifts throughout the years. During the final year, psychological problems and psychological help were seen as increasingly ambiguous. Indeed, a confidence in the ability of psychological help, so prevalent in the first years the group met, became less of a contrast to religious help in the final year of meetings. Discussions during the final year place psychology and theology increasingly as companions in the task of human health and development. In a surprising foreshadow to the main thrust of Viktor Frankl and many existential psychotherapeutic philosophies, Fromm stated, "people want help in making sense of one's own existence...today there is an enormous amount of bewilderment...much of the psychic help which people need today is that of finding some philosophical, religious or ethical orientation as to what sense life makes".⁷⁰ Fromm then states the inherent philosophical presuppositions psychology tends to ignore, "one of the questions we might discuss, then, is to what extent the psychic helper has the function in our culture of helping people to find some philosophical orientation. Today it seems as if psychiatrists have taken up the task of priests and other such helpers. The philosophy they stand for, as a rule, is as metaphysical or religious as any theologian could have".⁷¹

These somewhat surprising statements set the tone for the final meetings that followed. Help, the seeking of help and the giving of help, were seen as inherent human qualities. Therefore what kind of help did people really want? Were people seeking a

⁷⁰ Erich Fromm, October 20, 1944.

⁷¹ Erich Fromm, October 20, 1944.

new authority or new direction? Do we naturally seek advice? Who dispenses advice and do we expect particular people in our culture to be bestowed with wisdom, perspective, experience and objectivity? Ultimately do human beings need “reliable human contact”⁷² in order for healthy and positive development to occur? And what would constitute reliable? As Alfried Längle would state decades later, we are essentially “dialogical” beings: our existence is not only contingent upon dialogue and relation with others but dialogue, contact and by extension, reliable and dependable interaction, culminates in meaningful and positive growth and development.

Again, seen within the context and backdrop of catastrophic world events, human beings, the NYPG argued, faced confusion about who they were and what they were capable of. What might emerge to restore solidarity and a genuine capacity to care for and aid another human being? Who was reliable, who possessed wisdom in what Fromm described as a bewildering age? Outlining several key questions for the group to discuss, Fromm foreshadows much of post-modern critical psychology. First, were there philosophical, religious or political differences that place limitations on psychology’s generalizations about help? What kind of person is capable of dispensing psychological help? Is there a difference if the analysand believes in God but the analyst does not? What was implicit and explicit about the goals of therapy? Second, should the implicit and explicit philosophical positions be examined in the various psychological approaches? Third, what was the aim of psychological help and was there a uniform criterion for health? “Is the aim of help”, Fromm stated, “adjustment to society or is it the maximum realization of individual potentialities”?⁷³ He thought that psychology had

⁷² Erich Fromm, October 20, 1944.

⁷³ Erich Fromm, October 20, 1944.

not come close to examining these issues and yet they were becoming increasingly pertinent.

Themes of solidarity, security and psychology's ultimate mandate abounded in the last year the NYPG met. These three loose themes wove around ideas of psychological help. Helping another human being assumed ethics of good-will and solidarity. Both psychology and the church were equally criticized by members of the NYPG for failing to provide a sense of solidarity or an ethic about what binds us together. Psychology was criticized for its promotion of the idea of "security" and its attachment to psychological health. Security implied an attainable, stable and a universal standard of psychological health. Increasingly, however, members spoke of the ambiguity of human life and the near impossibility of fully understanding what made us truly human. Were we really secure? Was security something we could honestly have and experience as stable? Harry Bone commented during a meeting in 1944 that life was both precarious and stable. There was in fact no absolute security for human values.⁷⁴ During the January 12, 1945 meeting Erich Fromm declared, "the word security has become almost a fetish of modern psychological thinking...how can anyone be secure in view of the cosmic forces, and living in such a world as ours and in light of history"?⁷⁵ Fromm's statement, once again, evokes the sentiment and experience shared by all members during these years.

Was psychology's objective really adjustment to society? If this were so, could psychology honestly claim it did not play a part in social ethics or an individual's responsibility regarding the social world? Harry Bone suggested that therapy represented

⁷⁴ Harry Bone, NYPG, November 10, 1944.

⁷⁵ Erich Fromm, NYPG, January 12, 1945

an arena in which “unfulfilled potentialities [will] have an opportunity to begin their realization”.⁷⁶ But did psychology direct those potentialities towards an adjustment to society or did psychology limit itself to the potentialities of the individual without context? When would therapy be successfully concluded Bone asked, and wondered whether “a better adjustment to society” was an appropriate indication?⁷⁷ Underneath these statements was the degree to which the psychologist or minister was an authority in determining the criteria for adjustment and whether an individual was so adjusted. The assumption by most psychologists in the group, not surprisingly, was that the minister could not be an objective authority and was therefore incapable of such an evaluation. The minister, it was maintained, would necessarily bring his own theology to bear and this both Harrison Elliott and Carl Rogers agreed was where the counseling process stopped and why the minister should not engage in therapy. However, psychology itself could not claim it was making value-neutral judgments and this would extend to any theoretical pronouncements on what constituted a healthy adjustment, or not, to society. Indeed, this raised the ever present and thorny issue of the value judgments present in the act of helping, the division of authority in helping, and what kind of values were either being upheld or abandoned. This was further compounded by whether one could claim that the social world was in fact stable and that adjustment to it was key to mental health.

Psychology claimed to be value-neutral and yet psychological help was in many ways an engagement in the ethics of social adjustment; on some level psychologists were engaged in coordinating individual potentialities and responsibilities with the demands of the social world. Directing his comments to the psychologists, Tillich stated, “would you

⁷⁶ Harry Bone, NYPG, November 10, 1944.

⁷⁷ Harry Bone, NYPG, November 10, 1944.

allow a human being to say to [himself] 'I am what I am; everything that I have done or that I have omitted is by necessity so'? Would this not mean that [he] accepts [himself] in [his] totality, past and present, which means that [he] does not need to say 'I could have done better; I should have done differently'".⁷⁸ "Do we look at our being", Tillich continued, "as a whole, as a totality of processes or as a complex entity of decisions in which we are responsible [rather than] events which drive us".⁷⁹

Was psychological authority and help really objective? These questions continued in the final meetings of the NYPG. In his January 12, 1945 presentation, theologian David E. Roberts asked the psychologists present, "surely your own world-view will operate consciously or unconsciously as a guiding criterion in estimating the extent to which the other person is facing reality or evading it".⁸⁰ Roberts added, "therapy has often been represented as more presuppositionless than it actually is".⁸¹ "In trying to form an appraisal of therapy", Roberts stated, "I am troubled by certain antinomies. The paradox of promoting human autonomy and responsibility from within the context of complete determinism seems to me to be no more puzzling, but also no less puzzling, than the traditional theological dispute about free will and predestination".⁸² Psychologists in the group, however, continued to uphold the ideals of scientific objectivity by claiming that the therapist, rather than the minister, was able to exercise restraint in terms of influencing therapy with value judgments. And yet Roberts made the astute observation that psychology in fact upheld strong values of self-sufficiency and autonomy and he then asked whether these psychological ideals should be upheld over

⁷⁸ Paul Tillich, NYPG, November 10, 1944.

⁷⁹ Paul Tillich, November 10, 1944.

⁸⁰ David E. Roberts, NYPG, January 12, 1945.

⁸¹ David E. Roberts, NYPG, January 12, 1945.

⁸² David E. Roberts, NYPG, January 12, 1945.

and above ideals of solidarity, community and responsibility to others. Again, preceding much debate in the decades to follow about the extent to which psychology was stripped of social responsibility, Roberts stated, “from some Christian standpoints at least, the psychotherapeutic attempt to achieve a certain kind of autonomy or self-sufficiency is subject to the perils of self-deception and escapism”.⁸³ Roberts continued, “another point in which I need enlightenment is how to tell where resistance to society is healthy or neurotic and where adjustment to society is healthy or neurotic”.⁸⁴ Who would decide this and how could the criteria for such decisions be value-free?

This re-kindled the debate as to whether the promotion of individual dignity and uniqueness, in addition to autonomy and empowerment were really polar opposites of community and solidarity. Did psychology even attempt to integrate these issues? Dr. Grace Elliott offered a reflective critique of her own discipline when she presented to the group on February 9, 1945. Psychological help, Elliott contended, aimed at “achieving community in relationship with [his] fellows, or social solidarity”.⁸⁵ Elliott saw the need for community as extremely urgent in the present historical moment as the “infantile solidarity of totalitarianism”, she maintained, “must move towards mature solidarity”.⁸⁶ Critiquing psychology’s lack of attention to this issue, Elliott stated, “without specific provision for this need much of the individually oriented help given to individuals becomes ineffectual”.⁸⁷ Elliott renewed the idea that psychological help and what constituted “adjustment” was often a precarious balance of fostering individual potential in light of that individual being simultaneously a social being, inextricably linked to the

⁸³ David E. Roberts, NYPG, January 12, 1945.

⁸⁴ David E. Roberts, NYPG, January 12, 1945.

⁸⁵ Grace Elliott, NYPG, February 9, 1945.

⁸⁶ Grace Elliott, February 9, 1945.

⁸⁷ Grace Elliott, February 9, 1945.

social world. Stating that there, “can be no perfect person, scheme, theory or plan”⁸⁸, Elliott foreshadows what Viktor Frankl and Alfred Längle will strongly advocate in the decades to come, that “[man] needs a set of values, a sense of direction, a frame of reference for [his] life”.⁸⁹

If we needed these things, we were also increasingly demanding them from people we perceived to be authorities of help. What difficulties did a minister face in pastoral counseling? Otis Rice offered an interesting picture of the complex issues that he confronted in a paper he gave to the group in December, 1944. Interestingly, the psychologists in the group did not reflect on their own roles when presumably they were confronted with a similar array of complex issues. Rice states,

The apparent problems or needs presented vary greatly. There are simple questions of fact. There are other problems that appear as specifically theological, purely as matters of faith. Others seem as obviously matters of emotional conflict or of personal, social or vocational procedure... With the great variety in type and severity of the needs in mind, I believe my first concern is to determine whether I may safely or productively undertake to help the individuals who come to me. One danger for the parish priest is [his] propensity for acquiring a beltful of spiritual scalps under the guise of ‘saving souls’... In a sense, then, from the beginning of the contact I am forced to make a tentative appraisal of the situation and a very rough and very provisional interpretation of what I believe to be the real meaning of the problem no matter in what form it is presented or disguised. I must try to make clear that this is no ‘snap judgment’ nor in any manner of speaking a ‘diagnosis’. I attempt to listen intelligently enough so as to learn what the parishioner is saying and feeling, yet at the same time being alert to the ‘danger signals’ of situations with which I know I am not competent to deal.⁹⁰

Rice’s honest appraisal of help generated what could be called jurisdictional debates over exactly who had authority to deal with particular problems. This not only raised the question of categorizing “problems”, but also of categorizing and separating the people

⁸⁸ Grace Elliott, February 9, 1945.

⁸⁹ Grace Elliott, February 9, 1945.

⁹⁰ Otis Rice, NYPG, December 8, 1944.

who could deal effectively with some issues and not with others. Who helped whom? Who, in society, was perceived to have greater authority in helping? Interestingly, theologian Seward Hiltner believed the medical doctor possessed the greatest authoritarian role whereas Erich Fromm believed the priest had a greater social authority.

Aside from who had authority, the issue of transmitting values also became key once again. It was assumed that the priest or minister would be conveying religious values in any kind of therapeutic intervention. Fromm argued that the priest or minister was bound by a set of philosophical and theological convictions. It was also assumed that these convictions would in fact limit the extent to which a parish priest or minister could effectively “help” a parishioner. As Fromm sarcastically commented, “how far is the conflict of a person to be looked upon from philosophical angles”?⁹¹ Tillich acknowledged the inherent values a minister or priest would pass on, however, he suggested that psychology, if analyzed, could not be seen as a value-less activity either. Harry Bone similarly asked “whether there is any content of moral values in the mind of the therapist either that he conveys to the client or whether he even uses it to guide his psychotherapeutic procedure”.⁹² Therapy or the counseling process would ideally, Bone argued, assist an individual in finding a personal view of life or frame of reference and that the “more completely free from value judgments the therapeutic procedure is, the more satisfactory it is”.⁹³ But was psychology, or could it be, value-free? Tillich stated that in this “so-called value-less” counseling the very fact that the value judgment is hidden is a crucial point”.⁹⁴ Carl Rogers ended the December meeting by suggesting that

⁹¹ Erich Fromm, NYPG, December 8, 1944.

⁹² Harry Bone, NYPG, December 8, 1944.

⁹³ Harry Bone, December 8, 1944.

⁹⁴ Paul Tillich, NYPG, December 8, 1944.

counselors do hold value judgments, “it is only that [he] restrains [himself] in a situation where [he] wants to promote psychological growth”.⁹⁵ Again, we are faced with the thorny issue of whether this implies the theologian or pastoral counselor is incapable of restraining their value judgments and does this in turn inhibit the process and outcome of therapy or does it imply that ministers cannot or should not do therapy? By the same token, to what extent is psychology actually value-free and what does this “restraint” on the part of the therapist actually mean when placed up against a concept of help? What is psychological help then? As we will see in Alfred Längle’s theory of Existential Analysis, psychological growth and development, indeed psychological “help”, is contingent upon dialogue and the nexus point in an I-thou encounter.

David E. Roberts outlined several problems the ministers faced in terms of how they were perceived by the public and in turn, what was expected of them. The minister, Roberts stated, was “supposed to be kindly, interested in people, generous and sympathetic; [he] is available without payment of special fees, to almost anyone who seeks [his] help...the minister is expected to believe in the possibility of salvaging shattered human lives; [he] represents the converting power of religion”.⁹⁶ Except for the transmission of fees, much of this description would fit the role of therapist. Therapists themselves believe in the transforming possibilities, if not converting power, of psychology. Roberts believed that ministers were restricted by a prescribed “set of answers”. Rather than “assisting the individual to develop capacities for self-help through maturing emotionally”⁹⁷, ministers, according to Roberts, more often presented a set of answers. These answers “consist largely of generalizations about sin, salvation,

⁹⁵ Carl Rogers, NYPG, December 8, 1944.

⁹⁶ David E. Roberts, NYPG, January 12, 1945.

⁹⁷ David E. Roberts, January 12, 1945.

God, Christ, the Bible, the Church, immortality, social progress, sex mores, and the omnipotence of faith, hope and love. All too often these ‘answers’ do not contain much of the minister’s own spontaneous feelings, reactions and reflections. They are built up largely in terms of what his denominational standards demand and what is appealing to his congregation”.⁹⁸ Roberts’ comments are quite interesting. Superimposing some of the recent debate in critical psychology, for example, psychology too has been questioned about the theoretical generalizations it relies on and in turn perpetuates in therapy through the answers a therapist may provide. Even if the therapist subscribes to a therapeutic model and does his or her best not to impose answers on the clients, therapists are still confronted by clients who may (and often do) expect answers from psychology if not at the very least some input by the therapist. To what extent does psychology meet the demands and expectations of its “congregation”?

The assumption Roberts leaves us with is that a minister may impede the ideal of psychological growth through the imposition of religious answers. Rather than facilitating an individual’s own inner resources, strengths and “answers”, ministers respond to the questions brought forth by parishioners with fixed answers under an assumption that these answers will provide the necessary help. This ideal, however, seems just that. For it seems nearly impossible to suggest that psychology itself doesn’t meet the needs of its “congregation” with generalized answers or that it imposes values or answers that may or may not hinder the process of developing a client’s own inner resources.

Another very interesting point Roberts raised was the difference in responsibility between the therapist and minister. Roberts suggests that the minister is in many ways

⁹⁸ David E. Roberts, January 12, 1945.

expected to be “a watch dog of conventional morality”⁹⁹. This is why, Roberts continues, “it is often difficult for a minister to take a permissive attitude toward some forms of unconventional behavior...[he] has to recognize that [he] has a responsibility to whole families and to a whole parish...the therapist, on the other hand, is responsible solely to [his] client; and within very broad limits [he] can let conventions go hang for the sake of getting to the bottom of the trouble”¹⁰⁰. What is fascinating about these comments is the degree to which the therapeutic process itself, and individuals within therapy are stripped of responsibility. Do therapists, for example, really have a limited amount of responsibility toward their clients? Roberts’ comments suggest that even in the mid 1940’s, psychology was perceived as having limited social responsibility and that a division between the individual and the social (rather than being inextricably linked) was clearly entrenched. Expanding psychology’s responsibility would be taken up quite vocally by Viktor Frankl and many other existential and humanistically oriented psychologists in the decades to come.

In the final year the NYPG met, theologians were very vocal about not only the limitations of psychology, but also the limitations and difficulty of doing therapy from a ministerial context. Theologians amongst the group were eager to share and discuss what was becoming a growing demand on them; dealing with issues brought to them from members of their congregations that were not necessarily religious in nature. Although differences abounded between psychologists and theologians about individual and social responsibility and the imposition of values when helping fellow human beings, both sides reflected the growing ambiguity and uncertainty of analyzing human nature.

⁹⁹ David E. Roberts, January 12, 1945.

¹⁰⁰ David E. Roberts, January 12, 1945.

Conclusion

In a paper given to the group in 1943, Tillich described the “eccentricity of the human mind” which made it impossible to formulate what he called a “closed system” in relation to being. Clearly taking aim at the dependence on science and the claims of theoretical certainty that the discipline of psychology was increasingly adopting, Tillich was also suggesting how ambiguous human nature was and the near impossibility of capturing what it is that makes a human being truly human. To accept this ambiguity, David Roberts felt that psychology had to take a position on what he called, “[man’s] metaphysical and religious hunger”.¹⁰¹ To do this, psychology could not isolate itself from philosophical or theological considerations, all of which gained from each other and were what bound us together.¹⁰² The minutes and papers of the New York Psychology Group offer a fascinating illustration of the attempt to bind psychological, philosophical and theological concerns. Despite differences of opinion and disciplinary or vocational biases, members of the NYPG fielded challenging and honest questions about the limitations of both psychology and theology. That ambiguity is clearly seen in the over abundance of questions that were raised by the group with little attempt to formulate clear and distinctive answers. What the group did share was a profound concern for the world and its inhabitants. In the chapters that follow, many of the same questions and concerns about psychology and more generally, our ability to take seriously the human need for value and meaning will continue to be raised in both interdisciplinary dialogue between theology and psychology and within psychology alone.

¹⁰¹ David E. Roberts, January 12, 1945.

¹⁰² David E. Roberts, January 12, 1945.

CHAPTER THREE

The Meaning of My Existence and the Responsibility for Our Existence: Viktor E. Frankl's Existential Challenge to Psychology

“If the concept of a will to meaning is idealistic at all, I would call such idealism the real realism. If we are to bring out the human potential at its best, we must first believe in its existence and presence. Otherwise man too will ‘drift’; he will deteriorate. For there is a human potential at its worst as well! And in spite of our belief in the potential humanness of man we must not close our eyes to the fact that *humane* humans are, and probably will always remain, a minority. But it is precisely for this reason that each of us is challenged to *join* the minority. Things are bad. But unless we do our best to improve them, everything will become worse”.¹⁰³

Introduction: An Emerging Psychology of Responsibility

Is it idealistic to state that we must believe in and should strive for such things as love, community, responsibility, care for self and others and social justice? How do beliefs in human potential relate to psychological health? Should psychologists convey such beliefs, actively instill hope and responsible, caring behavior to their clients? Is this part of psychology's mandate? The quotation that begins this chapter is taken from Viktor Frankl's book *The Unconscious God*. Originally a lecture given to a Viennese audience in 1947, the quotation reflects the ethical appeal that Frankl had begun directing towards psychology as early as the 1930's and which characterized much of his writing following his release from Auschwitz in 1945. In the shadow of psychology's growing

¹⁰³ Viktor E. Frankl, *The Unconscious God* (New York: Washington Square Press, 1985) 84.

cultural influence, amidst the context and aftermath of WWII, the burgeoning cold war and the proliferation of nuclear weapons, Frankl's appeal for humane and responsible action extended to the discipline of psychology. When Frankl began his first lecture tour in the United States in 1957, audiences were introduced to a theoretical and therapeutic approach that linked the meaning and value of human existence with individual psychological health and development.

This chapter explores Frankl's challenge to psychology during this period as he began reaching an English audience through the publication of *The Doctor and The Soul* in 1955 and the series of six lectures he gave at Harvard Divinity School in 1957. Frankl's challenge, itself a product of historical, social and political events, was embedded in his theory of Logotherapy. That challenge not only advocated an active ethical and social role for the psychologist, it stressed the importance of expanding psychology's vision of human nature. An expanded vision would include the multiple meanings and values, both individual and cultural, that influenced the experiences we had of ourselves and our perceptions of well-being. Further, Frankl introduced the important therapeutic role responsibility played, again both individually and collectively, in psychological well-being and development.

The examples drawn from Frankl's body of work for this chapter illustrate yet another exploration and dialogue being undertaken between psychology and religion during the mid-twentieth century. Within the body of Frankl's message and theory, attention focuses on many themes that had also dominated the discussions of the NYPG. These include: a tone of urgency about the state of the world and more specifically, the mental and spiritual health of individual citizens, the idea that interdisciplinary discussion

and action was necessary to literally bring people together as opposed to further isolating them and finally, questioning psychology's mandate and purpose. What was seen as problematic about psychology? Why should psychology's mandate be broadened and how did a dialogue between religion and psychology help in this endeavor? Did psychology have a responsibility beyond the individual and more specifically, what was a therapist's responsibility? Was psychology generally, and were therapists specifically, responsible for facilitating the creation of the "good" citizen? These themes and questions provide the overall context in which to explore Frankl's initial foray into North American universities.

Background

The intellectual climate and interdisciplinary dialogue going on between theology and psychology in the United States during the mid-twentieth century made Frankl's first visit there in 1957 both timely and opportune. Frankl's challenge to the discipline of psychology was met with a receptive audience in the late 1950's at many theological seminaries in the United States. Many theologians had, since the 1930's, found dialogue between theology and psychology both fruitful and necessary. The previous chapter focused on the discussions between theologians and psychologists during the meetings of the New York Psychology Group from 1941 – 1945. Psychology's place and function within culture and theology's response to, and integration of, psychological theory and practice continue in the next chapter with focus on Hans Hofmann's direction of the Harvard Project on Religion and Mental Health in the late 1950's. Further, in the late 1950's and early 1960's, the Academy of Religion and Mental Health continued to bring

theologians and psychologists together at its yearly symposiums. The symposiums of the ARMH covered such topics as moral values in psychoanalysis and dialogues between religion, culture, science and mental health. All of these examples are a testament to the rich dialogue taking place mid-twentieth century.

Frankl's first trip to the United States was in fact sponsored by the Religion in Education Foundation. His nation-wide tour included a series of six lectures at Harvard Divinity School in September 1957. The audiences of these lectures represented a diverse mix of psychologists, medical faculty and theologians, many of whom would continue to cross paths in the years to come. Harvard psychologist Gordon Allport, for example, would later play an important role in introducing Frankl's book *Man's Search For Meaning* to American publishers. Theologian Hans Hofmann of Harvard Divinity School, and the moderator at one of Frankl's six lectures, would take up the position as director of the Harvard Project on Religion and Mental Health that same year and later be involved in the Academy of Religion and Mental Health. Frankl and Paul Tillich would also become active in the Academy of Religion and Mental Health. One 1962 meeting of the ARMH, for example, advertised a luncheon lecture to be given by Frankl followed by a dinner lecture by Tillich. Frankl and Tillich were also on the editorial board of the *Review of Existential Psychology and Psychiatry* from 1961 – 1965. Articles by the two men appeared side by side in the first issue of the review in 1961.

Grace Cali, Tillich's secretary at Harvard, recalls Tillich being introduced to Frankl by Hans Hofmann. Although it is difficult to ascertain the exact dates the meeting between Tillich and Frankl took place, one could surmise that it occurred during Frankl's visit in 1957. According to Cali, Tillich had read Frankl's first English publication, *The*

Doctor and the Soul, and found the concepts of Logotherapy “very compatible with his own ideas...although he admitted later to me he had some difficulty digesting the coined term of Logotherapy”.¹⁰⁴ These associations and the many that followed were ones Frankl relied on and gained from in the years that followed his first lecture tour to the United States in 1957.

Frankl embodied and conveyed a particular philosophical position when he came to lecture in the States. In the quotation that begins this chapter, Frankl seemed to foreshadow the reception his theory would receive in the States for decades to come. Was it idealistic or realistic to suggest that psychologists might play an active social role in helping to facilitate a just and humane world? Frankl was calling on therapists, and psychology as a whole, to be directly involved in creating a better world and that began with each individual and progressed outward. Was this psychology’s role though? Were there particular values of justice and compassion, for example, that psychological theory and practice should promote? As we will see in chapter 5, many post-modern critiques of psychology, particularly those within critical psychology, have decried the transmission of values both in theory, and even more so within the therapeutic setting, as negative and highly problematic for psychology. In 1957, Frankl was not only stating that psychology did in fact transmit values (psychology was not value-free), he suggested that some values were indeed worth upholding and transmitting.¹⁰⁵ But he argued, to do so effectively, psychology had to become increasingly aware of its own presuppositions, its

¹⁰⁴ Grace Cali, *Paul Tillich First-Hand: A Memoir of the Harvard Years* (Chicago: Exploration Press, 1996) 68.

¹⁰⁵ What became problematic for Frankl was the continuous charge by critics that Logotherapy imposed values and Judeo-Christian ones at that. Frankl’s appeal that humanity must believe and maintain values of community, responsibility, peace and justice, for example, was assumed by him to be values all human beings understood and what could bind us together universally.

foundational philosophies, its intent and what specific values it was in fact transmitting. Frankl was suggesting that psychology become much more self-reflective in order to become more relevant.

In the years that followed, critics of Logotherapy would however, continually charge that it imposed Judeo-Christian values and an overt message of social responsibility on its clients.¹⁰⁶ Many felt that Frankl's theory of Logotherapy was not psychology but a derivative of religion or philosophy and a weak one at that. The imposition of values, especially responsibility, was linked to the role of religion and not psychology. Further, Frankl's inclusion of, and dialogue with, religion, philosophy, politics and ethics tended to marginalize Logotherapy within psychological circles. Frankl's theory continually struggled for legitimacy on the margins of what was deemed psychology "proper" because it was felt to lack empirical validity and the interdisciplinary alliances he engaged in were deemed separate from psychology's mandate. Labelling Frankl's theory "quasi-religious beliefs"¹⁰⁷, for example, was a common sentiment in North America during the 1960's and 1970's. Many articles written on Frankl's theory during these same decades debated what Logotherapy was and attempted to unearth its latent religious themes. By the time of Frankl's death in 1997, however, his approach to psychology and particularly his approach to therapy were re-categorized as "unique" and hailed as "re-humanizing medicine and psychotherapy".¹⁰⁸

¹⁰⁶ In a harsh review of Frankl's book *The Will to Meaning*, Bernard Steinzor characterizes the criticism Frankl received over the issue of values when he stated, "You [Frankl] characterize the values you share with your class and culture as universal and thus objective". Bernard Steinzor, "Thinking Meaningfully About Emptiness", *Psychiatry and Social Science Review*, III, 9 (Sept., 1969), 26.

¹⁰⁷ Anonymous British Review of *The Doctor and the Soul* by Viktor E. Frankl, *Psychiatry and Social Science Review*, (June 2, 1970).

¹⁰⁸ A common and repeated expression used in the obituaries following Frankl's death in 1997.

Here we have an obvious example of psychology's own precarious definitions and labels as to what constitutes psychological theory and practice.

Earl A. Grollman discussed what he called the jurisdictional problems between psychology and religion in an article on Frankl in 1964. Grollman felt that Frankl had in fact "done much to enlarge the conversation between psychology and religion".¹⁰⁹

Throughout this chapter, an attempt is made to illustrate Frankl's contribution to this rich dialogue in the late 1950's. Frankl, much like those involved in the NYPG, felt that the time had come to question seriously whether values of justice, responsibility, compassion and peace among human beings belonged solely within the realm of religion. Along with this questioning came a re-evaluation of what was missing in psychology and psychology's place in our society.

However one feels about the theoretical structure of Logotherapy, in 1957 Frankl was calling for an explicit acknowledgment of the active and influential role that psychologists and psychological theory play in western culture. If, as Frankl suggested, psychologists were witness to, and highly influential interpreters of, the human condition, did psychology stop there? If psychologists were witness to, and interpreters of, the harsh realities of our human constitution and development, were they not also witnesses to the reality of our infinite potential and creativity? And did psychology stop there? Psychology, and therapists specifically, were also participants. Therapists encounter other individuals and participate in the intricate and intimate layers of being human. Could psychology realistically claim itself to be a neutral and objective enterprise? If the transmission of values is inevitable and given psychology's cultural stature, should

¹⁰⁹ Earl A. Grollman, "Viktor E. Frankl: A Bridge Between Psychiatry and Religion", *Conservative Judaism*, XIX, No. 1 (Fall, 1964), 20.

psychology be influential in transmitting ethical responsibility and social justice? If a psychologist's role is characterized by aiding, assisting and possibly healing a fellow human being, if psychologists on some level enter the profession with a fundamental concern for another person's well-being, then for the sake of humanity's continuation, development and growth, such a role requires a belief in, and embodiment of, our infinite potential. This, Frankl was suggesting, is not necessarily a negative thing. If psychology has power and influence, what might it powerfully influence?

Frankl's position was of course influenced by his own experience with the events of WWII, his incarceration in several concentration camps over a two and half year period, his professional position as both a neurologist and psychotherapist, his Jewish and European heritage and the influence of mid-twentieth century European intellectual thought, specifically existential philosophy. All of these contexts influenced his ethical, social and political position and in turn, influenced his theory. Is Logotherapy then too far from the parameters of psychology's mandate or is it possible to see Frankl's theory specifically, and psychology potentially, as positive and active contributors to ethical existence generally? In a 1969 review of Frankl's book *The Will to Meaning*, Bernard Steinzor took aim at what he felt was Frankl's lack of social commentary. He stated, "Your [Frankl's] life was deeply affected by a social catastrophe, yet you hardly address any comments to the problems of communal action to seek justice in the struggle against authoritarianism, militarism, racism, poverty, and imperialism. Your index doesn't contain any reference to rage, violence, or hate, and you do not noticeably discuss evil and injustice".¹¹⁰ While one can argue that Frankl's publications for large general audiences did not overtly tackle "communal action" or "discuss evil and injustice", his

¹¹⁰ Grollman, 25.

existential perspective always paired the paradoxical relationship between our human capacity for evil and injustice alongside our potential for creative good. Once again, the quotation that begins this chapter is indicative of Frankl's acknowledgment that human beings are capable of both good and evil. Further, the numerous lectures Frankl gave to live audiences, particularly in the United States, often addressed social issues and as we shall see later in this chapter, Frankl discussed the link between individual development and communal action in light of world events to his Harvard audience in 1957. Finally, much of Frankl's theory and writings embody his personal attitude toward life. His writings acknowledge the contradictions inherent in being human but they convey a deep conviction that a positive approach to life is ultimately stronger and more creatively enduring.

We now look specifically at Frankl's first English publication in 1955 and the introduction of his theory of Logotherapy. To do this, we look at five specific points: the spiritual dimension, the will to meaning, self-transcendence, freedom and responsibility.

The Doctor and the Soul

In 1955 Frankl's theory of Logotherapy was introduced to a new English audience with the publication of *The Doctor and The Soul* in the United States. The book was initially listed in the *New York Times* under the heading "recent religious books"¹¹¹. This classification of Frankl's first publication is a telling indication of the complex reception his work would perpetually endure in North America until his death in 1997. The

¹¹¹ *New York Times* (1857-Current File); Nov. 16, 1955, p. 12; ProQuest Historical Newspapers *The New York Times*.

original manuscript, published in German in 1946 under the title *Ärztliche Seelsorge*¹¹², had undergone a unique and profound journey. After branching out from studies in Freudian psychoanalysis and membership in Alfred Adler's society for Individual Psychology, Frankl completed his first book length manuscript on Logotherapy in the early 1940's while he worked as a neurologist and psychiatrist at a Viennese hospital. At the time of Frankl's deportation to the concentration camps in 1942, the manuscript remained with him tucked in the lining of his overcoat. As most of his belongings, including the clothes he wore, were confiscated as he entered his first camp, the manuscript was subsequently lost. This manuscript, a culmination of his work on Logotherapy up to that point, Frankl would carefully reconstruct from memory and record on small notes during the duration of his two and a half years in the camps. Frankl would later comment that the intellectual activity and challenge of re-constructing the manuscript saved him both mentally and spiritually.

The subtext throughout *The Doctor and the Soul* was the limitations of, and prescription for (by way of a new theoretical perspective) psychology. Frankl had initially considered Logotherapy to be a supplement to established models of psychotherapy in an attempt to broaden the "concepts of man" that he believed anchored all psychological theory. As mentioned, we will look at five specific "supplements" Frankl introduced. These are the spiritual dimension, the will to meaning, self-

¹¹² The English translation of the original German title of this particular book is "Medical Ministry". Frankl often used the term medical ministry to English audiences to describe Logotherapy. Although he was often ambiguous about any religious connotation, Frankl deliberately chose the original German title in order to "shock" the medical profession. The book was intended for medical doctors in order to convey the necessity and urgency of integrating a variety of perspectives with the medical model. Health required a multidimensional approach to heal the "whole" person. I wish to thank Dr. Alfried Längle of Vienna, Austria, who worked with Frankl for 10 years, for our many conversations over the past four years on this subject and his constant generosity in sharing these stories with me.

transcendence, freedom and responsibility. Each of the supplements overlaps throughout Frankl's work depicting the complexity and creative nature of human existence.

The Problem with Psychology

Frankl felt that the influence of science on psychological theory was detrimental to the discipline. What seemed increasingly problematic for psychology was the dependent use of scientific objectification to fuel psychological theory. A dependence on the seeming objectivity of scientific paradigms was based in turn on a belief and world-view that human phenomena could be analyzed in predictive and observable patterns of behavior and expression. Although Frankl was trained as a medical doctor and certainly did not object to the use of scientific paradigms, their increasing use within psychology seemed out of step with what psychology did or what it was supposed to accomplish. From an existential foundation, Frankl sought to coordinate a multidimensional approach to psychological health and well-being. Wanting to address the "whole" human being, Frankl's Logotherapy was a mixture of psychological theory and practical therapeutic techniques embedded with medical, philosophical, religious, existential and ethical perspectives.

The theoretical conceptualizations about human nature within the discipline of psychology had, according to Frankl, been "constrained by biological, psychological [and] by sociological factors"¹¹³. For Frankl, human existence was marked by its inherent freedom. Human beings were deciding beings, capable of analyzing, contemplating and putting into context the multiple structures and realities to which they

¹¹³ Viktor E. Frankl, *The Doctor and The Soul*, (New York: Vintage Books, 1986) 20.

belonged, which they themselves were influenced by, and to which they could freely choose an attitude. We were free to decide whether these structures produced limitations, whether they were challenging and created possibility, whether they motivated us and offered potential to transcend, modify or change these same structures. Human beings, according to Frankl, existed within “structured spaces” and historical existence¹¹⁴. While these multiple contexts influenced and may be internalized experientially as an individual’s reality, these same “structured spaces” provided only partial glimpses into human existence. Psychology had, in Frankl’s opinion, limited its analysis of human existence to these structured spaces, be they psychological, biological or sociological, but had not adequately addressed the subjective experiential level nor had it attempted to probe a fundamental existential question: what made a human being truly human? The experiential level revealed how any one individual responds to, adopts an attitude towards, or makes decisions for or against these structured spaces. Without doubt one can argue that these subjective experiences are embedded in these very structured spaces so that the line between what is clearly individual and what is collectively experienced is somewhat blurred. But for Frankl, psychology had subsumed that ambiguous subjective experiential level into theoretical generalizations. Psychological reality for Frankl, indeed psychological development and well-being, was discovered in the precarious and complex middle ground of both social and cultural context and subjective experience.

¹¹⁴ Frankl, *The Doctor and the Soul*, 26.

The Spiritual Dimension

Frankl expanded the established two-dimensional structure of the human psyche in Freudian and Jungian psychoanalysis to include a third spiritual dimension. The spiritual dimension represented the core of the human psyche. It embodied wholeness and the union of body, mind and spirit. Each dimension, beginning with the somatic, permeated the next to depict ever expanding and inclusive levels of human consciousness. The spiritual dimension represented the location of, and source for, what Frankl identified as truly human phenomena. Frankl expanded the existing theoretical model of the human psyche in order to account for those capacities, potentials and experiences that defy strict definition under somatic and psychic theorizing. Psychology, Frankl believed, needed to be open to these fluid human experiences and it therefore required a language and structure to discuss human experience that was essentially open-ended and ambiguous. Something had to account for our uniquely “human” potential for, and expression of, such things as creativity, hope, faith, belief, love, relatedness, justice, despair, destructiveness, hate, cynicism and hopelessness. Although one can argue that it is difficult to clearly ascertain what constitutes uniquely human phenomena, Frankl’s point was that human experience, subjectively and collectively formed, always had the potential to defy the parameters of theory, especially psychological theory.

Although quick to defend the spiritual dimension as a secular psychological category that facilitated discussion about our potential for and experience of such things as faith and belief, Frankl was never able to argue convincingly to psychological and pastoral counseling audiences in North America that the spiritual dimension did not have

a religious connotation. Despite this, many psychologists, medical doctors and pastoral counselors felt indebted to the concepts Frankl introduced. Concepts such as the spiritual dimension and self-transcendence did in fact provide a contemporary, humane, more expansive and philosophical view of human existence that many in the “helping” professions found useful within therapy, in their relationships with clients or patients and in their approach to clients who expressed feelings and experiences of suffering, hopelessness and meaninglessness, in particular. Frankl’s perspective on human existence and language gave therapists, pastoral counselors and medical doctors a wider, more multidimensional framework to discuss fundamental existence questions with their clients and patients. Indeed, broaching these existential realities within therapy and therefore being willing to accept the ambiguity and complexity of human existence within the therapeutic realm made dialogue (as opposed to an objective, interpretive and prescriptive approach) between therapist and client a point of relatedness and connection that facilitated the “healing” aspect of therapy.

Human existence, Frankl observed from an existential lens, was finite and somewhat predictable and yet human potential was always infinite. The essence of being human, what made us truly human, was the middle ground between the reality of finite existence and infinite potential and possibility. Navigating this middle ground was key to positive or “healthy” psychological development and the nexus point for the discovery of meaning and value in our lives.

The Search For Meaning

The search for meaning(s)¹¹⁵ or the will to meaning, according to Frankl, was our primary motivation: the active and deliberate search for meaning and value in our lives. The will to meaning was a continuous life-long motivation. According to Frankl, we discover meaning through the actualization of three values: creative, experiential and attitudinal values. By participating, engaging with and responding to others, our community and the world, we could potentially discover meaning(s) through our work or any concrete creative contribution to the world. Second, through our active dialogue and engagement with the world and with others, meanings were also potentially discovered at the subjective experiential level. It was through dialogue and relation with others in addition to being open and receptive to the world experientially that we could discover moments of meaning and value related to one's own existence, such as love, community, justice or beauty, for example. "The greatness of a life", Frankl stated, "can be measured by the greatness of a moment"¹¹⁶ Our willingness to be open and receptive in experiencing the value and dignity of an other human being opens up the potential for discovering the meaningfulness inherent in each life and each moment. It opens us experientially to such uniquely human contemplations such as beauty, truth and justice. Finally, our human ability to freely choose and decide is reflected in the attitudes we adopt toward ourselves, toward others and toward any situation in which we find ourselves. Our human freedom not only enables us to adopt an attitude, but it also allows us to change the attitudes we adopt and hold. We are free to become conscious of our

¹¹⁵ Frankl used the plural form: "meanings" to denote the continuous meanings that are potentially discovered throughout the course of one's life. The plural form was not to be mistaken with a notion of ultimate meaning. Critics of Frankl often felt he was in fact making a direct link between the meanings we discover in our lives and an ultimate meaning.

¹¹⁶ Frankl, *The Doctor and the Soul*, 44.

attitudes, to look at them objectively and to further decide if they hinder our development and our relationship with others or whether they facilitate greater depth of experience and understanding (of both ourselves and others). For Frankl, the attitude we are potentially capable of as human beings in the face of suffering or unalterable crisis was particularly poignant. An existential psychotherapy acknowledges that human existence is marked by experiences of both tragedy and joy. Despite this dichotomous reality, any situation holds the possibility or potential of unconditional meaningfulness through the attitude and approach we choose at a given moment.

One could say that Frankl's contribution to an analysis of human reality was acknowledging that our existence, development and well-being resides between two poles: reality and potential, finitude and infinite possibility or certainty and uncertainty. Human existence is a continuous movement and search towards meaning, a continuous creation and re-creation of meaning and certainty, both real and possible. Being human also requires an acknowledgment of, and abandonment to, what is uncertain, ambiguous and possibly unknowable and that this is equally true for both science and religion. Following Frankl's logic, neither a secular nor a religious world-view fully conquers the uncertainty of human existence. This was certainly true of psychology. The health and well-being of humanity generally and individuals specifically within therapy resided in humane acknowledgment, acceptance and understanding of the ambiguous, yet meaningful, contours of human existence.

Freedom

There are of course predictive aspects of human life and Frankl did not deny these. Human beings are finite biological beings. Our physical development unfolds in a somewhat predictable yet finite process. Psychologically and experientially, human beings develop and express themselves often predictably, a reflection of neurological development as well as shared cultures, values and social norms. Although we are constrained to some degree by our biological finiteness and by our shared social or communal realities (Frankl's structured spaces), there exist degrees of ambiguity and possibility in all human endeavors that point to our inherent freedom. Frankl linked and grounded the existential philosophical idea of freedom with the reality that human beings suffer, that they experience and inflict tragedy and conflict. Once again, influenced by existential rationale, Frankl brought together the idea of infinite possibility inherent in individual freedom with the realities of suffering, tragedy and death. Together, this expanded picture of human reality made life unconditionally meaningful. The possibility and freedom to experience one's life as meaningful and valuable could therefore be discovered at every moment even at times of unexpected and unavoidable suffering. An individual suffering from terminal cancer or illness, for example, was in Frankl's opinion, capable of transcending the immediate experience of physical suffering through his or her freedom of attitude toward the situation. The onset of disease and its progress through the body has of course some predictive elements. Cultural and familial responses to disease and inevitable death also factor into the meaning and value of the experience for the individual. Without denying these elements or their effect upon the individual, Frankl

asks us to consider that the same individual simultaneously has the freedom to respond, take a stand and adopt a particular and unique attitude towards these experiences and realities. At every moment there is a space of possibility and an individual has the freedom to fill that space with a unique and distinctive response or attitude. A personal stand or decision emerging from the experiential level in tandem with a moment or situation of unavoidable suffering or tragedy was the ultimate expression of human freedom. Freedom and meaning were expressed and discovered through an awareness of, and confrontation with, the tragic and joyous events and moments of life and not through the denial or suppression of one or the other. Despite the reality of social or cultural structures, our relational predisposition and our finitude as biological beings, our ability or potential to experience and derive meaning from difficult situations constituted human freedom.

Self-Transcendence

The idea that existence is a process of becoming influences what health, healing, growth and development mean from an existential perspective. The description of becoming as process is linked to the idea of transcendence: of expansion, growth, development, an active movement oriented outside and beyond oneself, a striving experientially and literally toward an external point of reference. Our human ability and freedom to transcend a given situation or moment, even if through attitude alone, implies considerable fluidity between psychological health and “ill-health”. The notion of self-transcendence was contingent upon an amalgamated vision and analysis of both internal subjective experience and the world (the larger contexts) to which one belonged and in

which one was embedded. The concept also alluded to a Judeo-Christian vision of the continuous transformation of humankind.

To summarize, Logotherapy was not limited to the internal psychic processes of an individual. Frankl's theory attempted to expand and coordinate both internal and external realities. He saw psychology as problematic for the following reasons: its limited ability to coordinate internal and external reality, its inability to accept the ambiguous reality of being human, its downplaying of experiential manifestations of possibility and potential and finally, its unwillingness to confront the implicit foundational philosophies, values and conceptualizations of humankind that framed theory and therapy. These limitations constrained what Frankl felt was a uniquely human and spirited capacity for unlimited potential in the midst of, and never separated from, the "structured spaces" or external contexts to which we were bound. The limitations on human existence evoked a "fragmentary quality"¹¹⁷ to life but this, Frankl argued, did not take away from the meaningfulness and value that life potentially held at every moment. Actualizing, or bringing into concrete expression, the potential meaningfulness and value of life was our moral responsibility.

Responsibility

Morality, according to Frankl, was an inherent human quality, linked with responsive action. As a theory and therapy, Logotherapy's aim was to guide a client toward a greater consciousness of their responsibility. Frankl's application of the term was heavily influenced by the Jewish concept of responsibility for others and for

¹¹⁷ Frankl, *The Doctor and the Soul*, 66.

community. The concept of responsibility further linked the individual to community, it made psychological health and development contingent upon a reciprocal and mutually influential dialogue with, and ethical duty towards, “other”. “The uniqueness of the human personality”, Frankl wrote, “finds its meaning entirely in its role in an integral whole”¹¹⁸. Further, “the value and dignity of the individual is dependent upon the community. But if the community itself is to have meaning, it cannot dispense with the individuality of the individuals who make it up”¹¹⁹.

What was our individual responsibility? According to Frankl, life continually presented us with questions and challenges. It was our duty and responsibility as human beings, as individuals, to become increasingly conscious of and responsive to these challenges. Our individual freedom was linked to a moral and ethical obligation to respond both to others and to community. From a Logotherapeutic perspective, my individual existence is grounded in an essential freedom. I possess the freedom to make a certain decision or adopt a particular attitude at a specific moment in light of a situation that confronts me and in light of the subjective experience and perceptions I have. My moral and ethical obligation as a human being is then to respond and act beyond my individual freedom, beyond my subjectivity and singularity. Again, human existence is seen in a relational yet dichotomous sense. My existence is unique and yet my existence is grounded in relation and otherness. I am free and yet my freedom is matched with an equal ethical obligation to respond and care for others.

Frankl’s concept of responsibility is also linked to a fundamental belief in life’s unconditional meaningfulness in spite of its finite and transitory character. Frankl

¹¹⁸ Frankl, *The Doctor and the Soul*, 70.

¹¹⁹ Frankl, *The Doctor and the Soul*, 71.

defined responsibility as a response-in-action. Once again, the uniqueness and dignity of individual life and experience is upheld but seen in a simultaneous dialogue with the external world. Our social embeddedness provided both freedom and restriction on our development and expression. Frankl's two-fold vision of humankind: freedom despite finitude extended to his commentary on social behavior. Ethical behavior fell under this two-fold vision as well. Ethical behavior encompassed what was good for the community and what was of highest value to the individual. This two-fold view of existence preserved the uniqueness, value and meaningfulness of individual life and experience but embedded that uniqueness in the reality of social responsibility and ethical acts that benefited the greater community. What was of value or what was deemed worthwhile behavior not only benefited the community, there were "whole areas which are the private preserve of the individual. These are values which can or must be actualized aside from and independent of all community...the rich store of values which experiences with art or nature offer to the individual even in utter solitude is essentially and fundamentally personal; these values are valid whether or not the community profits from them. In saying this we are well aware that on the other hand there are a number of experiential values which by their nature are reserved to community experience. These may rest upon a broader basis (comradeship, solidarity, etc.)."¹²⁰

An Ethical Mandate For Psychology

This leads to our final point that distinguished *The Doctor and the Soul*. While Logotherapy challenged the mandate, foundational assumptions and aims of psychology,

¹²⁰ Frankl, *The Doctor and the Soul*, 92.

Frankl was very overt in introducing a moral and ethical mandate for psychology. Psychology, specifically Logotherapists, had a duty to convey a “positive” philosophy to its clients. Frankl criticized the rise and increasing categorization of psychological problems such as “neurosis” and “syndromes”. As we shall see in the following section, Frankl asked his Harvard audience in 1957 if we can scientifically account for the supposed increase in neurosis, possibly suggesting that psychology constructs psychological problems as much as it observes them. Psychology had to acknowledge its own presuppositions and perhaps be actively engaged in producing a more responsible citizenry. Frankl’s answer is not without its problems either. How do you convey this to clients and should you? While Frankl admits that Logotherapy resides on the “borderland” between medicine and religion, he clearly links psychological health and development to an ethical framework of responsibility and feels that psychologists or therapists have a role and ethical duty to convey guideposts for psychic health and development that merge precariously with specific social action and responsibility.

Logotherapy can, on the one hand, be seen strictly in the context of Frankl’s intent, a supplement to established models of psychotherapy, another lens for broadening the analysis of human existence. At the same time, Frankl’s overt ethical call and dialogue with religion raises even more questions about what psychology is, the role of therapists and the near impossibility of claiming that psychology is an objective and neutral enterprise. Critics have often charged that Frankl’s work lacks intellectual depth and substance. Despite these charges, Frankl’s work, and particularly the two mid-twentieth century examples in this chapter, reveal a vocal and humane appeal that he felt belonged squarely within the domain and mandate of psychological theory and therapy.

How are we to live peacefully and justly with each other, how can each of us reach our unique potential and also reach out for and be concerned for our fellow human beings? This enormous appeal was made to two fairly powerful and influential voices within our culture: psychology and religion.

The Harvard Lectures 1957

Frankl's ethical appeal, directed to the discipline of psychology and as social commentary, continued during his first lecture tour in the United States in 1957. In the spirit of dialogue and cooperation amongst psychologists and theologians, Frankl was invited to give a series of six lectures at Harvard Divinity School. Addressing an audience receptive to, and active in, what were perceived to be pressing social issues, Frankl outlined, once again, what was problematic about psychology. First, psychology had neglected the extent to which culture had impacted its own theoretical paradigms, despite the growing influence these same paradigms had on the wider culture. Second, psychology tended to restrict its analysis of human nature to individual intrapsychic processes. Even more problematic was psychology's fundamental belief that these individual processes could be analyzed apart from social context. For psychology to analyze human nature realistically, it was imperative, Frankl argued, for psychology to have an ear to society and culture. Third, psychology was anything but an ahistorical, apolitical enterprise. It was rather, historically, culturally, politically, economically, ethically and religiously interconnected. Our notions of psychological health and well-being, therefore, had to be seen, analyzed and interpreted from a much wider interdisciplinary lens. In doing so, psychology needed not only to broaden the scope of

its mandate, but also be aware of the foundational philosophies and values that contributed to its theoretical conceptions of what well-being and health meant. Whether stated implicitly or explicitly (generally implicitly), these foundational presuppositions influenced the images and concepts of human existence that in turn shaped and defined theory, research and therapy.

Frankl's first lecture tour of the United States took place at a very interesting time. The intellectual climate and dialogue between existential and humanistic oriented psychologists and theologians had preceded Frankl's arrival in the United States by several decades. Frankl's invitation then, in the context of these ongoing dialogues, seems appropriate and timely. No doubt the classification of *The Doctor and the Soul* in *The New York Times* in 1955 under "new books in religion", the Religion in Education Foundation's sponsorship and organization of the tour, in addition to Frankl's own interdisciplinary style and approach to psychology, contributed to the warm welcome at Harvard Divinity School.¹²¹ Indeed these factors are telling indications as to where Frankl's theory made initial inroads in the United States: on the religious side of the psychology/religion divide. Frankl's own ambiguity about religion and the mixed reactions his theory and writings received meant that it was never very clear whether his theory of Logotherapy fit the criteria of a strictly psychological model or whether it should be classified a "religious psychology". In either case, the varying responses to Frankl's work illuminates several perpetual problems. First, what constitutes a

¹²¹ Much of the material for this section is based on the 6 original audiotapes (reels 1 – 6) of these lectures and a typed manuscript of what is called the Master Lecture. The Graduate Theological Union archives very generously allowed me to have the original audiotapes of the lectures transferred to CD. The quality of the original audiotapes is quite poor in addition to Frankl's struggle with the English language. Because of these issues, I have not quoted extensively from this material. I would like to thank Graduate Theological Union archives in Berkeley, CA for granting me access to these audiotapes currently housed under the Viktor Frankl Library and Memorabilia at GTU.

psychological theory? Second, what images and theoretical positions about human nature are clearly psychological? Are there distinguishable boundaries around psychological theory and research that clearly demarcate psychological questions from religious about human nature and human development? Because of this complexity, one that seems to continue to this day, it seems fitting to look closely at the Harvard lectures.

The series of six lectures Frankl gave provides an excellent illustration of psychologists and theologians grappling with the possible dialogue, potential overlaps and ambiguous demarcations between psychology and religion. The lectures are also an important illustration of the many dialogues going on mid-twentieth century about the limitations of psychology and psychology's ultimate role in society. These dialogues also have a very strong ethical appeal. The appeal made by both psychologists and theologians in 1957 entailed: peaceful coexistence, love, knowledge of self and other, community and finally, individual and global responsibility. The appeals were reactive to world and cultural events and they proposed action in light of these events. The experiences of an increasingly capitalistic and technically fueled society, WWII, the Cold War and the proliferation of nuclear weapons, for example, created a sense of humanitarian urgency for many. Psychology and theology were equally criticized for their neglect in addressing the ramifications of these social and historical events. Believing there to be a significant rise in mental and spiritual distress, psychologists and theologians came together to address major contemporary problems. Their proposed action was interdisciplinary dialogue, a critical analysis and frank questioning of the images of human existence that psychology was so influential in constructing and perpetuating and, more instructive ways to educate seminary students to deal with the

lives and experiences of their twentieth century parishioners (a more extensive integration of psychological curriculum in seminary schools becomes a major focus of the Harvard Project on Religion and Mental Health, for example).

Many theologians had been influenced by psychological theory. Its integration into the work of ministers, for example, was seen as a positive step forward and yet many also joined a chorus of humanistic and existentially oriented psychologists who began questioning the narrowness of psychology. Erich Fromm had described psychology's mandate as ultimately manipulating and therefore negative. Psychology was seen as problematic because of its dependence on empirical objective science to theorize, categorize, and ultimately to prescribe appropriate (appropriate Fromm believed, for the functioning of a capitalistic society and not necessarily for the enhancement of human potential) ways of being in the world that were further couched in the language of mental health.

The perspectives that contributed to the mid-twentieth century dialogue between psychologists and theologians held that human beings could not be ultimately known and could not be projected, and therefore reduced, onto the plane of scientific or economic determinism. The assumption that psychology could ultimately "know" what it was to be human meant denying the possibility and potential for radical change, either at the individual or social level. Psychology's mandate of mental health was seen ironically as contributing to a process of alienation and isolation among individuals. In contrast, the existential perspectives and ethical appeal so prevalent in these mid-century dialogues saw mental health and psychological healing situated in the reconciliation, relationship and union of self and other. At the time of Frankl's arrival in the United States, those

engaged in an analysis of psychology's cultural role clearly felt that psychology could make significant contributions to the positive development not only of individuals but also of a renewed, expanded and more humble "concept of man", as Frankl often stated. But to do so, it needed society. The idea that human existence was ambiguous and ultimately unknown would mean confronting the reality of human creativity, possibility and potential as well as our restrictive capacities for destruction and hate. Erich Fromm provides an astute summary of the sentiment felt at the time,

modern [man] experiences [himself] as a *thing*, as an embodiment of energies to be invested profitably on the market. [He] experiences [his] fellow [man] as a thing to be used for profitable exchange. Contemporary psychology, psychiatry and psychoanalysis are involved in this universal process of alienation. The patient is considered as a thing, as the sum of many parts. Some of these parts are defective and need to be fixed. There is a defect here and a defect there, called symptoms, and the psychiatrist considers it his function to fix these various defects. [He] does not look at the patient as a global, unique whole, which can be fully understood only in the act of full relatedness and empathy.....if psychoanalysis is to develop in this direction it has still unexhausted possibilities for human transformation and spiritual change. If it remains enmeshed in the socially patterned defect of alienation it may remedy this or that individual defect, but it will become another tool for making [man] more automatized, and adjusted to an alienated society.¹²²

It is within this particular context of dialogue and sense of social urgency that Frankl began his first lectures in 1957 before a mixed audience of psychologists, psychiatrists and theologians at Harvard Divinity School. Those who had read Frankl's book, *The Doctor and the Soul*, or were hearing him for the first time, must have sensed the struggle Frankl would encounter with his theory of Logotherapy in the United States. Hans Hofmann would aptly remark as moderator at one of Frankl's lectures, "we are here

¹²² Erich Fromm, "The Limitations and Dangers of Psychology", in *Religion and Culture: Essays in Honor of Paul Tillich*, ed. Leibrecht, 36.

not only to be enchanted and delighted [by Dr. Frankl] but to help you [Frankl] face the American scene, the most raucous [no doubt will be] the psychoanalytic schools".¹²³

Although Frankl was adept and comfortable speaking and writing in an interdisciplinary fashion, he had a somewhat complicated relationship with religious affiliations. The Religion in Education Foundation (RIE) was Frankl's initial sponsor and made possible Frankl's introduction to academic audiences in the United States. Frankl, however, wanted his theory of Logotherapy to find a legitimate place among psychological theory. While he spoke passionately about the limitations of psychology, advocated dialogue, and made an appeal for a more ethically grounded and relevant psychology generally, he saw psychology as the more powerful and legitimate avenue for his theory. His ambiguous relationship with religious affiliations did not go unnoticed. Years later, in a series of letters between the wife of RIE's founding president Randolph Sasnett and Robert Leslie, founder of the Viktor E. Frankl Collection at Graduate Theological Union in Berkeley, CA, Frankl's unease with his association to the Religion and Education Foundation is illuminated. On February 27, 1989, Mrs. Martena Sasnett wrote,

I believe that the very first edition [reference to the publication of *Man's Search for Meaning*] had recognition of The Religion in Education Foundation. Viktor then was glad for any organization related to higher education which could give him an introduction to American audiences through bookings in the College of Medicine in our great universities. Viktor met Gordon Allport when Allport hosted him at Harvard on the first RIE tour in '57....Now, after Randolph's initial contact with Beacon Press for the manuscript of Viktor's and Allport's scholarly approval, and Beacon's acceptance, then Viktor felt he did not need us anymore. It was apparent that he did not want anything to do with "religion" – in whatever guise – so reference to RIE was sponged from further publications, and Gordon Allport was the one mentioned for his introduction to the U.S. academic scene.¹²⁴

¹²³ Frankl, Reel 5, Side 1.

¹²⁴ Personal letter from Mrs. Martene Sasnett to Robert C. Leslie, February 27, 1989, Viktor E. Frankl Collection, GTU 89-5-012, The Graduate Theological Union Archives, Berkeley, CA.

Frankl's lectures at Harvard are important, however, for the following reasons: Frankl is spontaneous in his delivery of many of these lectures and that provides a rare and valuable glimpse into the interdisciplinary style of Frankl's thought and work; the themes he raises during these lectures resonate with the important dialogue going on between theology and psychology during this time; the lectures address the problems and limitations of psychology; and finally, given the interdisciplinary space Harvard provided, these initial lectures seem to expose Frankl's political and cultural views more poignantly than subsequent writings and lectures he gave in North America in the decades that followed.

The question and answer periods that follow each of the Harvard lectures also provide valuable insight as to how Frankl's theory was received and what themes and questions characterized the dialogue between psychology and theology during this time. They also reveal a general question shared by those gathered as to whether psychology and theology should be engaged in dialogue or whether each had clear and separate mandates. Many in the audience, for example, felt that Frankl was re-translating theological statements within his theory of Logotherapy. From the very first lecture on September 20, 1957 the Harvard audience of both theologians and psychologists felt that Frankl's concept of the spiritual dimension, his notion of transcendence in relation to psychological development and his statement that each individual life was unconditionally and ultimately meaningful were all clearly theological. The psychologists felt this was problematic: an imposition of values and theological ones at

that. As we will see, Frankl answered these concerns from a perspective of ethical responsibility.

Mental Health and Therapy

Let us explore several specific illustrations from these lectures. First, Frankl contended that the construction of psychological categories of illness and disease was contingent upon cultural or social context. As mentioned, Frankl asked his audience the following general question; what gives rise to the belief (not the empirical fact) that neurosis is on the rise? For Frankl, such a belief is a psychotherapeutic leap because the categories and symptoms of neurosis are contingent upon social, cultural and historical context. Frankl continued to suggest that the content of delusions, or the delusional ideas of patients, for example, change and are shaped by the climate of the historical period one is speaking about and observing. “The spirit of the age”, Frankl stated, “makes itself apparent right into the depth of psychotic mental life”.¹²⁵ On the one hand Frankl was suggesting that psychology suffered from its own delusion: a belief in its own empirical infallibility. Psychology was very much in the business of constructing categories of mental illness. Psychology was anything but ahistorical or apolitical, the “spirit of the age” influenced psychology’s own belief system and construction of symptoms. Ironically, psychology’s powerful hold on our collective imagination influenced the belief and perception that these symptoms or illnesses were real and on the rise. The first step then was to be aware of the reciprocal influences that produced and perpetuated notions of mental health.

¹²⁵ Frankl, Harvard Lectures, Reel 1 Side 1.

If psychological theory, Frankl stated, absorbed the cultural, political, economic, religious, ethical and historical contexts in which it was embedded, psychology had also embraced a theoretical style that categorized, if not reduced, human experience to a predictive by-product of these same “environmental” influences. This assumes that the environment is stable and itself not open to reflective analysis. It was this reductive philosophy, Frankl claimed, so widely adopted and popular within many psychotherapeutic models that lead to a contempt for anything moral, spiritual or religious. Psychology could not, according to Frankl, close its eyes to the “spirit of the age” but nor could it ignore the religious and moral expressions of its clients. These expressions were more difficult to categorize, in fact they pointed to a very disruptive variable: much about being human could not be known. While psychology internalized and duplicated social contexts, it simultaneously influenced them. That influence, however, was seen as limited, problematic and negative. The challenge to psychology was to expand its theoretical boundaries (expand its purpose and mission) while retaining its powerful position as social commentator.

Frankl suggested that the individual stories that emerge through dialogue (not objective interpretation) in therapy were a complex hybrid of subjective experience, subjective moral and ethical expressions, subjective constructions of meanings, values and beliefs that both mirrored and rebelled against the internalizations of collective social, political, economic, ethical and religious expressions. This spawned much debate in the Harvard audience about the “confessional” aura of therapy. Many in the audience wondered whether a minister, priest or rabbi would be able to distinguish a religious enquiry or problem from a psychological one and in some cases know when to refer an

individual to a psychologist. The amount of time members of the audience and Frankl spent on this particular subject raises the problematic issue of classifying questions of existence. Frankl's response was that Logotherapy had to act as "medical ministry". Being responsible therapeutically meant being open to the religious and spiritual expressions of clients. Again, the audience of both theologians and psychologists grappled with this. Was a religious or spiritual expression identifiably different from any other expression in therapy? Were deep felt, sometimes painful, questions by a client about the meaning and value of one's life or life generally very different or was it the answers given to these existence questions that were markedly different? Frankl stated that questioning the meaning and value of life was not a sign of pathology or abnormality but the fullest expression of being human. Inquiries of this nature made by the client in therapy should be addressed by the therapist and considered a legitimate psychological exploration. The dialogue that takes place in therapy, from an existential perspective, revolves around questions of existence and the exploration of the meaning, value, expressions and possibilities of being human. At its best, therapy offers a space to explore possibilities that become imbued with further meaning and value through dialogue and are potentially brought into concrete reality by the client. Logotherapy aimed at giving secular therapists and doctors a perspective that would enable them to provide a therapeutic setting that did not shut the door to religious or spiritual expressions should the client wish to venture there.

Second, Frankl suggested that patients know too much. As early as the late 1950's, Frankl preceded present-day reflections on psychology by suggesting that a cultural proliferation of psychological terminology in the west was shaping our everyday

language, how we saw each other and the degree to which we internalized notions of human potential. The process of internalizing psychological concepts preceded clients into therapy and influenced not only what the client said but also the outcome of a therapist's interpretation of what was being expressed. Far from being a neutral and objective enterprise, Frankl pointed out two concurrent problems within therapy: first, by the client knowing "too much", the client may inadvertently fit their "story" to suit the model or theory used by the analyst and second, the interpretation of the client's "story" (if an interpretation is given) will fit both the specific approach and underlying concept of human nature at the foundation of the theory adopted by the therapist.

So what was Frankl suggesting? What was problematic about psychology? First, psychology had to confront its elevated status within western culture. Psychology was not even aware of the degree to which its conceptualizations about human nature were being adopted (often uncritically) by the population at large. If, as Frankl believed, every psychological theory had a specific philosophy of human nature at its foundation and that every psychological theory had a conception of what it is to be human, psychological theories also perpetuated these images. In terms of research, if every psychological theory made claims about what constitutes human growth and development, then these foundational concepts more often than not preceded theory by motivating and framing our initial questions which in turn influenced the outcome of psychological studies and subsequent analysis. In keeping with the growing critique that psychology could well fall towards scientific and emotional determinism, Frankl attempted to introduce a multidisciplinary dialogue to psychology.

Any kind of dialogue or interaction whether between two people or two disciplines is invariably a complicated dance and one that involves an intent: to collaborate, to explore mutual positions, to discover new perspectives and even to be receptive to substantial change. But at the same time, intended collaboration may not be equal, it may produce more questions and more problems, it invariably runs the risk of one person or one discipline wittingly or unwittingly overcoming the other rather than a true dialogue. Dialogue may inevitably create more ambiguity and less certainty. This is certainly the case with Frankl. Frankl's psychological dialogue with other disciplines runs in both directions. It is refreshingly provocative as a psychological theory with its openness to dialogue and collaboration, its suggested re-thinking of psychology's universal claims and assumptions and its integration of other perspectives in an analysis of human existence (religion being the most obvious one). But it also runs the very risk psychology was accused of, analyzing culture - in this case - through a Logotherapeutic lens. Despite this, Frankl denounced the increasing overemphasis on empirical and objective science within psychology and called for a more humble interaction between psychology and all cultural discourses.

Psychology as Social and Political Commentator

Despite Frankl's criticism that psychology was increasingly lapsing into generalities, much of his Harvard lectures contain fairly sweeping political generalizations. Clearly Frankl felt that a psychological perspective that began with the client in therapy and extrapolated to general observations about the wider population yielded a fruitful contribution to political discussion. Frankl announced that not only

psychology but politics needed to be humanized. A “spiritual earthquake” contributing to the “poisonous fumes of nihilism”¹²⁶ was a potentially global danger according to Frankl. The Europeans had experienced this historically and Frankl knew its manifestations: an ephemeral and fatalist attitude towards life, collectivist thinking and fanaticism, nihilism, and a fear of responsibility. Nihilism was a pervasive attitude, according to Frankl, an attitude that deprived being of any meaning, that an individual’s existence was meaningless and valueless. For Frankl, contemporary (western) humankind was expressing this attitude toward others and toward itself. This experience and expression created what Frankl termed an existential vacuum born of apathy and was concurrent with the increasing social and cultural expectations of the modern world. The pace to keep up morally and mentally with social, political, economic and technological changes, for example, was creating distinctive psychological problems. “Technology”, he argued, “is outstripping humanity”¹²⁷. Frankl used several analogies to describe these phenomena. First, biological acceleration (the earlier onset of puberty) was equated with several cultural accelerations causing what he called a puberty crisis within humanity generally. Second, where we once understood “self” as a creature in the image of God, we now saw ourselves in the machine age as both the creator and image of our own creation. These technical conceptualizations of self, then internalized, led us to believe we were “nothing but the product of...” This cultural trend, Frankl stated, paralleled the trend within psychology generally whereby the client was reduced “to the mere neurophysical realm”.¹²⁸ This tendency towards a “nothing but” attitude distorted the image of human beings and led to what Frankl felt was a pervasive global expression and

¹²⁶ Frankl, Harvard Lectures, Reel 1, Side 1.

¹²⁷ Frankl, Harvard Lectures, Reel 1, Side 1.

¹²⁸ Frankl, Harvard Lectures, Reel 1, Side, 1.

attitude of nihilism. In recent history, Frankl told his Harvard audience, “the conception of [man] as nothing but a product of heredity and environment – blood and soil – pushed us all into historical disaster”.¹²⁹ Our theoretical inventions and conceptualizations were, for Frankl, as dangerous politically and culturally as the concrete weapons we invent to destroy each other. Frankl’s tone was increasingly one of politician and preacher when he suggested that the gas chambers were not only invented and prepared by the military in Berlin, they were “invented at the desks and lecture halls of nihilistic philosophers and scientists unwittingly making philosophical statements concerning the essence and nature of [man] and thus conveying nihilistic philosophies and philosophical assumptions”.¹³⁰

Citing recent history, Frankl stated that the concentration camp, in his opinion, was a microcosmic mirroring of the world. “The concentration camp tore open the human soul and revealed the dichotomous quality of human existence. We were a mixture of good and evil, decent and indecent and this mixture belied the philosophies of pure race”.¹³¹ What psychotherapeutic teachings, Frankl asked, could be drawn from the camp? His answer, by way of warning to his Harvard audience in 1957, was our very real, very human capacity to create new concentration camps. Frankl implicated the discipline of psychology and what he called the de-humanizing tendency to reduce human experience to purely quantifiable categories. This tendency to belittle the possibility of transcending a given situation, to deny new potentialities and new meanings, to dismiss faith, in effect to strip human existence of positive value was one avenue toward creating new and repressive concentration camps. The tendency towards

¹²⁹ Frankl, Harvard Lectures, Reel 1, Side 1.

¹³⁰ Frankl, Harvard Lectures, Reel 1, Side 1.

¹³¹ Frankl, Harvard Lectures, Reel 2, Side 2.

cynicism and pessimism Frankl felt to be pervasive in the mid-twentieth century devalued dialogue, relation and cooperation.¹³²

Psychology not only had to be aware of its own constructions, its unwitting statements about the essence and nature of humankind, but it had also, given its prominence within western culture, to shoulder a social responsibility.

Psychology's Responsibility and the Responsibility of the Therapist

Frankl's psychological prescription for the disease of our time, what he called the dangerous attitude of nihilism, involved all psychologists. Psychologists had an ethical duty to warn against nihilism and they could only do this by having "an ear to society and culture".¹³³ This was certainly a different description of, and mandate for, what a psychologist did. Frankl's call to responsibility had several layers. First, it went against the professional projection that a therapist or psychological researcher was both objective and neutral. Second, it raised what was, and is, seen as the problem of psychology's insularity and apolitical, ahistorical stance. Third, it raised the question as to what extent a therapist is a social and moral compass and has a responsibility to guide the client and whether this is inevitable and should be acknowledged. Fourth, it required that psychology become aware of its underlying image of humankind and the impact this image has not only on the individual facing the psychologist, but of the impact these images have within the larger culture and how they are interpreted and used by the larger culture.

¹³² Frankl, Harvard Lectures, Reel 2, Side 2.

¹³³ Frankl, Harvard Lectures, Reel 1, Side 1.

If a psychologist had this kind of social and political responsibility what then was psychology's mandate and specifically what was Frankl suggesting as Logotherapy's mandate? Psychology must, according to Frankl, stimulate an individual's search for meaning. This search or striving for meaning in one's life, what Frankl termed the will to meaning, was the primary motivating factor in a person's existence. A Logotherapist, and by extension any psychologist, should stimulate the will to meaning, stimulate the possibility for meaning throughout life and stimulate an individual's responsibility. A therapist should guide an individual toward a positive goal. A therapist should therefore embody a specific and fundamental posture: that there is something to aim for, the aim or goal should be positive, this goal of striving forward and towards something or someone is necessary for positive growth and well-being. Clearly this is a value the therapist embodies and a value the therapist conveys as therapeutically positive to the client. Frankl's Harvard audience immediately voiced concern that these sentiments were a clear imposition of values and that ultimately the therapist would be leading or directing the client in a certain direction. Frankl, however, felt there was a distinct difference between a general valuing of the meaningfulness of life and/or a belief in positive human potential that the therapist should personally embody (and in Frankl's vision, has a responsibility to convey to another human being especially at a point of crisis), and the imposition of specific guidelines or values the client must follow in his or her particular life. The therapist, specifically the Logotherapist, begins the process of therapy "with the assumption that life is meaningful and that there is meaning to one's existence"¹³⁴. Although one can argue that this is a general value about life, Frankl distinguished this

¹³⁴ Frankl, Master Lecture Manuscript 1957 (pages not numbered).

from what the client ultimately does by himself or herself. The therapist, Frankl stated, observes the steps “but the walk itself is performed by the patient”.¹³⁵

Psychology, Frankl pronounced, had to remind itself that human beings were not driven beings but deciding beings, free and certainly capable of shouldering responsibility. Frankl saw the role of the Logotherapist as one who assisted the awakening of responsibility within the client. The hope for the client was that he or she would be able to move independently forward, conscious of his or her unique responsibility, conscious of their freedom, conscious of their attitudes, better able to choose and decide, to be open to discovering potential possibilities or meanings and finally, to implement these concretely in their own lives.

Logotherapy, Frankl stated, was an education toward responsibility.¹³⁶ We were not, Frankl suggested, driven by ego or super ego, not mere products of heredity or environment, but free responsible beings. Logotherapy was seen as a supplement to help or inform disciplines like psychology to enlarge the images of humankind and the presuppositions about humankind that anchor most theory. The idea of transmitting an ethic of responsibility also extended for Frankl to education, theology and social work. Each of these areas, Frankl believed, faced the existential vacuum of modern man: the frustration, aimlessness, boredom and meaninglessness that derived from the modern world. An education in responsibility entailed the following: responsibility for our decisions, for our answers, our moral conscience, for society, for humanity and for some, a responsibility to God.

¹³⁵ Frankl, Harvard Lectures, Reel 5, Side 2.

¹³⁶ Frankl, Harvard Lectures, Reel 6.

Being human and acting responsibly meant exercising the existential act, the ability to transcend somatic and psychic circumstances. We were more than mere products of the environment, more than psychodynamics. What made us truly human was the ability to encounter ourselves, to objectify ourselves, to oppose ourselves, to be free and responsible agents. The existential act, the transcendence of the somatic and psychic dimensions, elevated us to the spiritual dimension, the human dimension. Science on the other hand, was limited to one dimension and therefore produced a limited view of human nature. If psychology were to transcend the level of psychodynamics and follow individuals into the human dimension it would have to confront the spiritual and moral conflicts that develop. For Frankl, psychology had stepped away from these spiritual and moral conflicts.

The Boundary with the Spiritual Dimension: Broadening Psychology's Mandate

Does my existence have meaning? Assuming I am more than psychosomatic or psychosocial dynamics, I exist, and therefore what meaning does my existence potentially have? Frankl's answer was two-fold: first, there is an unconditional meaning to life and second, we discover meaning through three values: creative, experiential and attitudinal. That there is an unconditional meaning to life alludes to an ultimate meaning. Frankl never denied this but was ambiguous as to whether he was implying that our existence points to an Ultimate Meaning. However, he did suggest that a Logotherapist must convey to the client the sentiment that life generally, and that each individual life specifically, possessed this unconditional meaning and value. Is this somewhat

problematic or possibly revolutionary for psychology? It may be the borderland with the religious or spiritual any psychologist faces when another human being sitting before him or her in dialogue raises questions about existence.

Becoming increasingly aware of the attitudes we hold and the contexts that surround them offers the possibility of discovering change, choice and meaning. Awareness offers the possibility of yet another lens through which to experience and contextualize our attitudes. Awareness offers a degree of distancing so one can utilize one's freedom to decide if a particular attitude offers possibility for growth, healing and meaning or whether it hinders these same things. An increase in awareness came through dialogue with the therapist and then could extend to the myriad dialogues a client has with the world around him or her. For Frankl, the dialogues we have assume an objective counterpart and he always left the door open to interpret one counterpart as God. God was, for Frankl, the partner in our most intimate dialogue: the experience we had of the speaker behind the voice of our conscience who was the ultimate partner in our innermost and deepest dialogues.

Questions about ultimate meaning or the unconditional meaning of human life were questions of existence that brought psychology to the boundary of the spiritual dimension. The meaning of one's existence resided within encounter, within relationship and dialogue with "other". And it was at the level of the spiritual that Frankl suggested healing resides. As finite beings we are unable to grasp intellectually an infinite and ultimate meaning. At that moment of inability, our thinking processes had to yield to belief. Ultimate meaning entailed belief and not intellectualizing. You cannot see the soul through a microscope, Frankl stated, but what motivates you to search is a spiritual

interest. There is, in other words, a presupposition in every so-called scientific search that Frankl believed began with a very human and spiritual quest, an innate search for meaning.

This caused one member of the Harvard audience to ask Frankl if he believed there was an overlap between the role of psychologist and the theologian? This in turn provoked an audience member to ask, if psychotherapy engaged in this innate striving and search for meaning, if psychotherapy were to take up the existential questions presented in therapy, then what were the boundaries between psychology and religion? Frankl's response was that psychology, and specifically his theory of Logotherapy, was not explicitly but implicitly dealing with religious questions. Frankl's attempt to distinguish the role of the psychologist from that of the religionist (his term) was always somewhat weak. Religion, Frankl stated, aimed at salvation while psychotherapy's aim was focused on the health of psychic systems. This, however, contradicted the fact that Frankl placed psychological health and healing squarely within the spiritual dimension, a dimension he had added to broaden the concepts of mental health beyond psychic systems. While the fundamental roles of psychologist and theologian were different, Frankl conceded that religion often had an unintended side effect of mental hygiene and could provide a level of security and anchorage psychology simply could not. Psychotherapy also had an unintended side effect in that the client might regain a capacity for faith. Frankl made a distinction between what he believed was a human capacity for faith from what was observable or what was known. The observable were givens (be they biological or environmental, for example) and the realm in which a doctor works and which he or she cannot transcend. Yet Frankl also suggested that a

doctor could not be a detached observer. A doctor engaged in the immediacy of interpretation and interpretation was always open to change and ambiguity. Interpreting the “facts” required a doctor to engage in a dialogue between what he or she not only saw before them but also what the patients themselves revealed. Medical doctors and psychologists were both bound to the realm of what was seemingly observable and knowable and yet continuously confronted by patients, fellow human beings, who defied equations of cause and effect. A therapist, for example, who met a patient with an attitude of possibility and conveyed a value for the unconditional meaning of life was also conceding that what lay beyond the psychosomatic realm was rather ambiguous and open to faith.

Conclusion

Frankl’s theory of Logotherapy was intended to be a supplemental anthropology in the hopes of expanding the horizon and possibilities of established models of psychotherapy. A fundamental issue that had to be addressed was, according to Frankl, the distorted underlying “concept of man” portrayed in most psychological theories. By distorted, Frankl meant the tendency of psychological theories to interpret human existence from a one dimensional plane, be it scientific or psychodynamic, and ignore what he felt was the multidimensional reality of existence. Becoming aware of these foundational images, how they guided theory and practice, why they developed and what their limitations were, was key.

Frankl’s adoption of a more interdisciplinary approach and vision to psychology’s primary subject, the individual, called attention to the inherent assumptions, values, intent

and multiple contexts that influenced theory and practice. To the audience at Harvard Divinity School in 1957, Frankl spoke passionately about the dignity and uniqueness of individual development and the meaning of existence. The meaning of individual existence, he stated, was contingent upon “my” being objectively challenged, challenged by a standard not of “my” own making. It was through challenge, questions presented, dialogue and engagement that led to our reaching out beyond our individuality and being ethically motivated to respond to others and the world around us. We were to place ourselves next to these challenges, compare and contrast, engage, find common ground or possibly rebel. The motivation to search for meaning, the striving to transcend ourselves towards something or someone was connected to what existential analyst Alfred Längle would later identify as our being essentially dialogical: our need and search not only for meaning, but for dialogue, relationship and engagement with others. At the Harvard lectures Frankl stated, “How ridiculous man becomes the moment he tries to make himself into his own standard, not only morally and spiritually, but also bodily....this is what [Jean-Paul] Sartre, the French existentialist is saying when he tells people that ‘man is inventing himself’. This means that man creates his own ideal and grows toward it. As long as such an ideal is created by himself, it can not be a really challenging ideal; it has no imperative – it carries no moral obligation at all”.¹³⁷

The questions from the Harvard audience and the answers provided by Frankl, although often very ambiguous, suggest the continual conflict and a mutual borderland between psychology and religion. Each was felt to be addressing aspects of human existence that often overlapped and often did not. The consensus as to whether there should be a clear distinction between the two was never reached. Even the most dubious

¹³⁷ Frankl, Master Lecture Manuscript 1957 (pages not numbered).

in the audience conceded that Frankl was challenging the foundations of psychology and pointing out some profoundly new ways of conceptualizing theory and therapy. Frankl's mid-twentieth century warnings and concern about the discipline of psychology extended to his commentary on psychotherapists as participants, witnesses and analysts of history and culture. Psychotherapists were witnesses to the depth of their client's experiences and how those experiences were both influenced by and influenced the social world. Therapists and theorists were collaborators with the greater social environment. Therapists and theorists were possibly cultural activists who both embodied certain values and potentially transmitted them.

At the end of one lecture, Frankl left his audience with an open and intellectual challenge. Frankl suggested that psychology's "deliberations must extend out", implying that psychology must engage and dialogue with the world and that there was in Frankl's words a "need for a psychotherapy [capable of preventing] any further spread or repetition of anything like a concentration camp"¹³⁸. Frankl's challenge suggested that psychology as a discipline was anything but ahistorical or apolitical. Psychology had a foundation in ethics, it had to be more "socially aware", play a greater societal role, be responsive, and contribute.

The continuing dialogue and cooperation between psychologists and theologians in tackling both individual and social ills continued during this period when theologians began to examine the role and influence of psychology in seminary schools and parishes when the Harvard Project on Religion and Mental Health began its work in 1957.

¹³⁸ Frankl, Harvard Lectures, Reel 3, Side 2.

CHAPTER FOUR

HANS HOFMANN AND THE HARVARD PROJECT ON RELIGION AND MENTAL HEALTH 1956 – 1961

“...mental health can conceivably become a common ground and basic criterion for religious, social and cultural vitality. But first of all the concept of mental health needs resolute liberation from any identification with the egoistic mirage of an unconcerned happiness, with a peace of mind that is not mindful that we are always integral parts and responsible members of our society and cultural situation. We cannot be happy or healthy if we do not gain our self-respect and the development of our personal potentials from an active participation in the societal and cultural struggle to rediscover always anew the meaning and purpose of individual and corporate human existence”.¹³⁹

Introduction

This chapter's opening quotation by theologian Hans Hofmann conveys a familiar sentiment shared among many theologians and psychologists during the mid-twentieth century. What we think of as well-being is not simply an internal emotive, perceptual or experiential equilibrium. Individual well-being is rather, inextricably linked to the well-being of community if not the continuation and development of human existence itself. Well-being reaches out beyond the individual psyche, well-being means dialogue, relation, participation and responsibility. Well-being has ethical undertones. What is interesting about this quotation is Hofmann's suggestion that mental well-being, as he refers to it, could be the common ground between two powerful, yet often competing,

¹³⁹ Hans Hofmann, "Religion and Mental Health", *Journal of Religion and Health*, Vol. 1, No. 4 (July 1962), 335-336.

voices within culture. The common ground, or perhaps the common good, to which Hofmann referred, could be discovered and expressed by both theology and psychology if each placed the meaning and purpose of human existence at the forefront of their attention and inquiries.

In 1956, the year before Viktor Frankl came to the United States and lectured for the first time at Harvard Divinity School, Hans Hofmann, associate professor of theology with interests in philosophy, psychology and the social sciences, was named director of the Harvard University Project on Religion and Mental Health¹⁴⁰. In very general terms, the project's mandate was to explore and utilize a dialogue between psychology and theology in order to expand and enhance the role of pastoral care within the Protestant ministry. The project sought, through interdisciplinary dialogue, to design and implement strategies and curriculum to better educate and prepare ministers to deal with the personal issues of their parishioners and to meet the societal demands of the twentieth century. Making the ministry relevant to contemporary society required a collaborative effort in order to question and debate those issues and problems which intersected both the personal and communal lives of minister and parishioner. It was hoped that the integration of a more enhanced psychological and sociological education with the theological training ministers received while in seminary school would better prepare them to deal with this pivotal intersection. As we saw in chapter 2, theologians within the NYPG began expressing a growing demand by members of their respective congregations to deal with issues that were not strictly religious in nature. And as we saw in chapter 3, Frankl expressed a similar sentiment, albeit from the perspective of psychologists, when he suggested that therapists were increasingly asked to deal with

¹⁴⁰ The project was first initiated in 1956. Dr. Hans Hofmann was officially named director in 1957.

issues raised by clients that were not strictly psychological in nature. In both cases, it would seem that neither religion nor psychology, on its own, was adequately prepared to address these demands. It would also seem that the demands made, the questions asked, by parishioners or clients embodied the multidimensional reality that characterized human existence and that both religion and psychology were slow to recognize this and adapt to it.

This chapter explores some of the issues at the forefront of the Harvard project's mandate. Most of the chapter draws on Hans Hofmann's commentaries that precede the project's publications. Reflecting both his own academic and theological interests, as well as the cumulative efforts of the project's contributors, Hofmann's writings offer a valuable glimpse of the late 1950's and early 1960's in the United States when there seemed to be a great momentum in the dialogue between psychology and theology.

Dialogue is the key. Despite the many reservations about whether there were or were not mutual boundaries between psychology and theology, there was a concerted effort at dialogue as a means to transcend divisions between the two. Issues and concerns about social justice, the common good and how to restore and maintain a humane world worried both psychologists and theologians. They saw a connection between these cultural and ethical concerns and the psychological and spiritual well-being of individuals. In the introduction to *Making the Ministry Relevant*, Hofmann wrote, "are we able to live in our world and organize our living together so that we can survive on human terms? In a highly impersonal, mechanized and demanding civilization, are the inner human resources both adequate and also sufficiently mobilized for the attainment of

a creative common life?”¹⁴¹ Hofmann’s question provides the backdrop for this chapter. We pay particular attention to his contributions¹⁴² to the project’s publications as they address and highlight many by now familiar and penetrating questions about individual and cultural health. The following four topics will be addressed in this chapter: the Harvard project itself, the question of a relevant ministry, the dialogue between psychology and theology, and the appeal for a just and humane world. As we will see, the Harvard project raised the same questions as the NYPG and Viktor Frankl about what constitutes health and well-being and did so with the same sense of urgency about the development and direction of humanity that we saw previously.

The Harvard Project on Religion and Mental Health

The Harvard Project poses a similar problem to the two previous historical illustrations: there is very little known or written about it and this influences how one approaches the material. The project’s work and Hofmann’s direction of it is cited in several publications on the subject of the church and mental health that appeared in the early 1960’s. However, a general analysis of the project itself or the placing of it within

¹⁴¹ Hans Hofmann, “Introduction” in *Making the Ministry Relevant*, ed. Hans Hofmann, ix (New York: Charles Scribner’s Sons, 1960).

¹⁴² The final report for the Harvard Project on Religion and Mental Health was submitted in 1961 and although a copy of the final report could not be located, the chapter relies on the series of publications Hofmann wrote and edited that emerged from the committee’s work. I had numerous communications with the Harvard Divinity School Archives, Harvard Divinity School itself and the main archives of Harvard University in an attempt to track down the final report from the project. None of these sources could locate the actual report or specific documentation regarding the project itself. I was directed to the year-end reports submitted annually by the Dean(s) of the Faculty of Divinity. I found one reference in the Dean’s report from the 1961–62 academic year that mentions Dr. Hofmann’s submission of the project’s final report (<http://hul.harvard.edu/huarc/reshelf/AnnualReports.htm>). For this chapter, I am relying on three specific book length publications and one journal article: *The Ministry and Mental Health*, *Making the Ministry Relevant* (both edited by Hofmann), *Religion and Mental Health* written by Hofmann and an article by the same title published in the *Journal of Religion and Health* in July 1962. The two books Hofmann edited include contributions by Paul Tillich, Reinhold Niebuhr, Seward Hiltner, Kenneth Appel and Talcott Parsons.

the context of a dialogue between psychology and religion/theology in mid-twentieth century is virtually non-existent. The chapter will, therefore, focus on Hofmann's own analysis of the situation and the potential worth of the project. This will, it is hoped, expose the scholarly potential contained in yet another historical dialogue between theology and psychology in the mid-twentieth century.

In 1956, at the instigation of the Academy of Religion and Mental Health, the National Institute of Mental Health (NIMH)¹⁴³ gave equal yet separate grants to Harvard, Yeshiva and Loyola Universities to conduct a five-year interdisciplinary study on religion and mental health. With Hans Hofmann named director of the Harvard project, many familiar names were selected for the board and/or contributed to the project's publications. They included: Paul Tillich, now on faculty at Harvard Divinity School and named to the project's board along with fellow Harvard professors Gordon Allport and Eric Lindemann from the department of psychology and G.C. Homans from sociology. The project produced several publications with chapter contributions from NYPG alumni Seward Hiltner, Paul Tillich and Gotthard Booth. Other contributor's to the project's publications included: Reinhold Niebuhr, Earl A. Loomis, a colleague of Tillich's from Union Theological Seminary, Robert C. Leslie, who would later be instrumental in founding the Viktor Frankl Collection at the Graduate Theological Union archives in Berkeley, California and Psychiatrist Kenneth E. Appel, a prominent member of the Academy of Religion and Mental Health during these same years.

¹⁴³ The National Institute of Mental Health was established in 1949. In 1955, the Mental Health Study Act authorized the NIMH to study, and make recommendations on, mental health and mental illness in the United States. The act also authorized the creation of a joint commission on mental illness and health. The Mental Health Study Act further authorized the surgeon general to award grants to non-governmental organizations for partial support of a nationwide study and reevaluation of problems of mental illness (http://www.nih.gov/about/almanac/historical/legislative_chronology).

An editorial in *Theology Today* announcing the interdisciplinary project at Harvard reported that the grants from the NIMH were precipitated by “the speedy deterioration of mental health among the American people on the one hand and the need to determine on the other hand which agencies in society are most helpful in providing an atmosphere in which mental health can not only be generated but sustained.”¹⁴⁴ The editorial went on to point to “religious agencies...as the most strategic”, something we would be unlikely to hear in 2006, “since they have a more continuous and relatively intimate relationship with persons than do medical and legal agencies”¹⁴⁵. That being the case, ministers and pastors would benefit from a more expansive education, one which included psychological education. A more relevant ministry would be “instrumental in making the Christian faith a vital reality in the life and society of our time”.¹⁴⁶

Despite the theological bias, the Harvard project was committed to interdisciplinary study and cooperation. Using the word “bridge” to describe the project’s primary aim, the initial press release expressed the hope of lessening the gap between theology and psychology. “Theology must become more relevant and the behavioral and natural sciences more concerned about understanding the real human factor. This calls for continuous interdisciplinary teamwork”.¹⁴⁷ Interdisciplinary cooperation was felt to be necessary in order to address these large concerns and issues. The fact that the project sought an interdisciplinary forum to address issues of individual and community health and well-being provides yet another fascinating historical example of two powerful cultural voices attempting fruitful dialogue. And as we will see in the

¹⁴⁴ E.G. Homrighausen, “The Church in the World”, editorial from *Theology Today*, 15, No. 1, (April, 1958), 1-6.

¹⁴⁵ Homrighausen, 1.

¹⁴⁶ Homrighausen, 1.

¹⁴⁷ Homrighausen, 1.

following chapters, more contemporary voices continue to raise similar kinds of issues. Although representing different psychological perspectives, critical psychology and existential analysis tackle many of the same issues and concerns about what factors might contribute to a sustained and humane approach to individual and cultural well-being. Contemporary theory, in some quarters, continues to search for what Hofmann called, the “real human factor”.

The Harvard Project was specifically interested in “(1) investigating the problems and potentialities of the Protestant ministry in relation to mental health, (2) designing a curriculum that would incorporate the results of the investigation, (3) the training of seminary teachers who could instruct in the area of mental health, and (4) preparing textbooks to assist in their teaching”.¹⁴⁸ Under the auspices of making the ministry relevant, the study spoke to the new role ministers were required to play in the mid-twentieth century and the new preparation they needed for it.

The cultural power and prevalence of psychology influenced the discussions of ministerial relevance and adequate training but also raised several complications. First, the burgeoning field of psychology in the west had made prolific penetrations into everyday language and thought. By the mid-twentieth century, this influence, it was felt, had contributed to a general shift in cultural focus from external community life to the internal psychic dynamics of individuals with the primacy placed on individual well-being and development. As representatives of a public institution who upheld the Christian ideals of community life for their parishioners, ministers now had to confront a complex contemporary relationship between seemingly private and individual mental

¹⁴⁸ Hans Hofmann, Religion and Mental Health, *Journal of Religion and Health*, (Vol. 1, Number 4, July 1962), 319.

health issues and larger cultural and social issues. Ministers were suddenly expected to be adept at handling this complicated relationship and deal with both the individual and communal lives of their parishioners.

Second, the influence of psychological perspectives on theology illuminated the strictly doctrinal position ministers had relied on in the past when faced with the personal issues of their parishioners. These entrenched positions were seen as contributing to the reluctance of the church to meet these new demands. Hofmann wrote,

“the Christian ministry can no longer limit itself to proclamations about God and the world from which ethically correct behavior can be easily derived. Teaching and preaching at people on an exclusively rational level and about all that is outside of [man] is simply no longer sufficient. People no longer worry as much about what is outside of them as they do about what is inside of them. They want to find out whether they themselves are able to stand their ground against the impact from outside. They want to know how all their diverse and at times contradictory facets can be channeled into a total personality constructively interacting with the environment”.¹⁴⁹

By the late 1950's, this singularly doctrinal approach of theology was increasingly seen as inappropriate for parishioners. At the same time, however, one can also see how psychological conceptualizations began to appear more and more frequently to describe and contextualize current issues. We see this in Hofmann's statement concerning our cultural shift from external to internal concerns and the framing of it from the context of the human psyche. Further, it was assumed that a renewed pastoral role would address the “human factor” and that ministers needed to be more cognizant of the complex expressions of human existence. In order to meet this challenge, it was felt that seminary schools needed to expand their curriculum with courses offered in the human sciences. Those working on the Harvard project specifically sought input from Harvard faculty and

¹⁴⁹ Hofmann, *Making the Ministry Relevant*, ix.

the courses being offered in the psychology and sociology departments as they designed a curriculum for a “relevant ministry”.

Third, the expansion of the human sciences taught in seminary schools was expected to enrich and inform the job ministers were now expected to do. Interestingly, it was also felt that a rigorous and more standardized curriculum in the human sciences would also help curtail the other side of the psychology coin, the misuse and piecemeal application of psychological insights to theological matters. Yet, psychological paradigms were also influencing the criteria for recruiting students to seminary schools. Mastery in theological doctrine was no longer seen as sufficient for the prospective seminary student and their future role as minister. Seminaries now had to address what criteria would be used to recruit the “right personality” for ministry in addition to providing the relevant training in the human sciences required for an expanded pastoral role. Recruiting the “right personality” for prospective ministry has some interesting parallels with the therapeutic criteria over what kind of person becomes or should become a therapist. Training in a specific therapeutic model often requires the trainee to undergo a rigorous period of analysis. It would be fascinating to know, in this particular instance, what psychotherapeutic model seminary students were expected to fulfill for their personal analysis.

Fourth, beyond the specific working outline, those involved with the Harvard project raised and discussed the interrelationship of individual and community well-being from a position that neither theology nor psychology alone had or could adequately address. Making the ministry relevant required an interdisciplinary approach but one that also looked critically at the shortcomings of both psychology and theology.

Making the Ministry Relevant

Unsettled by the contention that the twentieth century individual was increasingly focused inward, the Harvard project was, much like the NYPG and Viktor Frankl himself, a strong advocate for the “humane” being, a person responsibly and ethically linked to the world. The ministry thus had an important role to play vis-à-vis the individual but it also had to tend to that world. The call for a more relevant ministry was also a plea to recapture the “real human factor” in order to secure a just and humane world. Mental health and well-being was, therefore, once again inextricably linked to the ethical health of the world. When the Harvard project began its five-year study, members acknowledged that the world had changed and was continuing to change rapidly. Rapid technological, economic and social change shaped the questions, debates and commentary on contemporary society and raised the issue of the continued relevance of the ministry. Needless to say, the debates revealed divisions of opinion. Should the rights and value of the individual be emphasized and did this necessarily push our attention away from community? Or should we heed the increasing emphasis, elevation and dependence on economic and political forces that seemed to neglect the dignity and value of each individual life. Hofmann felt the “real human factor” was lost either way: dramatic economic, technological and social change combined with the increase in directing our focus and attention inward. Re-capturing the human factor meant acknowledging the dignity and uniqueness of each individual as he or she was related to and engaged with the world. The drastic social changes Hofmann addressed in each of his introductions to the projects’ publications were blamed for stripping individuals of the

very human qualities that, it was assumed, engendered peaceful and just behavior, responsibility and community. Once more, we see the search for a way of expressing the inter-relational character of human life and the contention that the nexus point between our internal and external worlds was where mental health, well-being and by extension the common good came together. Neither mainstream psychology nor traditional theology, according to Hofmann, had yet to fully recognize and acknowledge this vital key to human development.

The writings of the Harvard project possess a particular tone and many recurring themes. The historical time was described and perceived in terms of chaos, much like the expressions used by members of the NYPG, resulting in unprecedented numbers of people suffering from anxiety. A growing dependence on economic matters and technology was perceived, and feared, to have overtaken independence, freedom and critical thought, for example. There was a sense that core or central values had been lost, a prevailing sense that many “reliable” foundations within society had collapsed and that there was a breakdown in human interrelatedness. All of these factors led to a feeling that a radical renewal was necessary within western society and culture. Once again, it is interesting that the words used to describe the time were also couched psychologically in terms of loss, breakdown and anxiety.

Hofmann cited the increasing importance of economic matters as one example where the human being was manipulated into what he termed a “labor potential”. Education too, he felt, was being driven strictly by scientific and technological advances and bypassing the “unique potentials” within “individual promise”. The “absolute superiority of scientific and technological advancement”, Hofmann wrote, had severely

curtailed “the free development of the human personality”.¹⁵⁰ The “economic side of modern life”, he continued, “has been permitted to become so tyrannical just because [man] has unconsciously lost his ability to assert [himself] as a human being”.¹⁵¹ The consequences could be seen as Frankl himself remarked when he spoke at Harvard in 1957, and Hofmann reiterated in the physical and psychological problems increasingly prevalent in western culture. Placing the increase in human distress squarely on the social, political, economic and technological changes of the time, Hofmann also stated that we were increasingly dependent on psychology, itself a powerful cultural guide, to investigate, understand and pronounce on these same changes. He stated, “The social sciences and human engineering have produced very impressive machinery of skilled investigation and effective statistical comparison by which they demonstrate the total ramification and implication of this acute human predicament”.¹⁵² Yet Hofmann also voiced a familiar concern as to whether psychology could be as helpful as we expected it to be. Was psychology in fact capable of objectively analyzing culture and the social systems that produced it in the first place and continued to influence it?

Hofmann added a critique of the contemporary church. It too had, in Hofmann’s opinion, “accepted uncritically the economic development in this country” and its effect on the lives of parishioners.¹⁵³ Further, “this is more than partly to be explained by the financial dependence of the church upon those who contribute the most and therefore also feel that they should have the most to say about the role of the church. The church,

¹⁵⁰ Hofmann, “Outlook” in *Making the Ministry Relevant*, 4 –5.

¹⁵¹ Hofmann, “Outlook” in *Making the Ministry Relevant*, 8.

¹⁵² Hofmann, “Outlook” in *Making the Ministry Relevant*, 6.

¹⁵³ Hofmann, “Outlook” in *Making the Ministry Relevant*, 8.

unfortunately, is no different from other institutions in its desire to justify itself through external aggrandizement”.¹⁵⁴

Just as problematic, in Hofmann’s eyes, was the fact that the church had uncritically adopted psychological language which made its way into weekly sermons by ministers who were themselves poorly trained in the social sciences. Those same ministers were expected to pay psychological attention to the personal lives and predicaments of their parishioners. Indeed, congregations increasingly demanded such attention and in response, according to Hofmann, too many ministers had adopted a limited and uncritical psychological approach.

Hofmann stated,

It is disastrous that the Christian church should so enviously borrowed – and without any critical judgment – the psychiatric and psychological insights and methods which, in themselves, are merely the result of our inability to tackle problems in the broader context in which they have arisen. Because of their immoderate dependence on psychiatry and psychology, the churches have been driven to consider the individual instead of the community as a whole, the latter being, in fact, their proper function.¹⁵⁵

The focus on the personal lives of parishioners shifted focus away from communal life and disrupted the church’s “proper function”, according to Hofmann. In Hofmann’s eyes, the proper function of the contemporary Protestant church was to both concern itself with the internal life of individual parishioners and simultaneously represent and advocate a positive communal life. On the one hand, a relevant ministry had to meet the demands of a contemporary society that was increasingly concerned with the internal health and well-being of individuals in part due to the influence and power of

¹⁵⁴ Hofmann, “Outlook” in *Making the Ministry Relevant*, 9.

¹⁵⁵ *Making the Ministry Relevant*, 9.

psychology and in part due to the perception of an increasing “spiritual” malaise amongst people generally brought on, it was felt, by dramatic economic and technological advances.

To do so, the church required a relevant ministry, one that was increasingly aware of the social factors that were causing a loss of personal meaning and purpose for many individuals. At the same time, such a ministry had to uphold notions of social justice, for example, so that the congregation did not lose sight of their communal life. Both sides had to be balanced by a relevant ministry in order for the “real human factor” not to be diminished.

Making the ministry relevant meant finding a way to collaborate with other disciplines in the human sciences in order to renew the church’s role in contemporary society. “The minister”, Hofmann wrote, “finds it difficult to be an effective partner in the maintenance and recovery of individual as well as communal mental health as long as he is unclear and insecure about his professional identity and competence”.¹⁵⁶ Hofmann felt that seminaries inadequately trained ministers to deal with the “real problems of living”. Theological insights on their own were seen as limited when dealing with the daily problems faced by parishioners. “Unfortunately”, Hofmann wrote, “the effect of seminary studies often has been to make [the minister] believe that it was essential that [he] consent to the doctrinal and sectarian heritage of [his] particular denomination regardless of [his] personal intellectual and emotional development”.¹⁵⁷ Once again, this is a very interesting comment in light of both the self-appraisal and professional scrutiny many therapists undergo. Unlike many psychotherapies that continue to believe in the

¹⁵⁶ Hans Hofmann, Religion and Mental Health, *Journal of Religion and Health*, (Vol. 1, Number 4, July 1962), 320.

¹⁵⁷ Hofmann, Religion and Mental Health, 320.

objectivity of their professional posture, many others feel the therapist is being demanded by the client to be both a human being and a professional. Existential psychotherapies like Alfried Längle's acknowledge the changes a therapist undergoes as an individual, as a human being, with every encounter and dialogue he or she has with a client. Indeed, the process of therapy, much like an encounter with a parishioner, is a unique encounter between two human beings at a particular moment. Hofmann's assessment of a good pastoral approach sounds almost like an approach to good therapy: "knowledge", Hofmann wrote, "has to be personally appropriated and used imaginatively in concrete pastoral situations".¹⁵⁸

The Harvard project, therefore, proposed that a minister have an expanded education in the social sciences in order to understand their place in forming contemporary society and how individuals saw themselves. Hofmann wrote,

"...the prospective minister would acquaint [himself] as thoroughly as possible with the methods and means by which the contemporary social sciences attempt to analyze, diagnose, and prognosticate the individual, social, economic, and political predicament and potentials in which we live and work. A minister is ill prepared for [his] prospective job if [he] has no knowledge or appreciation of the secular forces and developments that mold the way of living, thinking, and feeling of [his] parishioners".¹⁵⁹

Although the final report for the Harvard project could not be located (the report was submitted during the 1961 – 62 academic year), several comments by the Dean of the Faculty of Divinity in his report for the academic year 1960 –61 addressed to the president of Harvard University certainly reflect the influence of the project and Hofmann's contributions. The Dean began his year-end report with the following:

¹⁵⁸ Religion and Mental Health, 328.

¹⁵⁹ Religion and Mental Health, 323.

Perhaps no other question harasses us more deeply than the simple but embarrassingly difficult one, 'Are we really educating students to be competent ministers?' Revolutions have turned the world upside down and have shattered the old forms of thought, faith, and society so radically that preparation for religious leadership in our time is fraught with a thousand questions, extending in every direction. A new age is being born, a new world is being framed, and the [man] who is to stand in the midst of it must be prepared to grapple with the new questions which are being asked".¹⁶⁰

To meet this new reality, the Dean continued, in an age of "new consciousness" as he described it, the prospective minister, "must reach a new level of religious maturity and professional competence".¹⁶¹

Mental Health: The Meeting Ground between Theology and Psychology

What is mental health? What are the criteria for determining what constitutes mental health and what becomes ill-health or psychopathology? What else is attached to mental health? As stated, mental health is not simply an inner psychological equilibrium, mental health also points to ethical behavior and parallels the health and well-being of cultures and nations. Where do psychology and religion meet on these issues? On one hand, Hofmann believed that it was "inevitable that psychiatrists and ministers should find themselves entangled in discussions about the relationship and possible co-operation between psychotherapy and religion. Both address themselves to the problem of human self-understanding and its expression through behavior".¹⁶² Hofmann, echoing Frankl and members of the NYPG, also asked the extent to which one could really identify a

¹⁶⁰ Year-end Report for the academic year 1960-61 written to the President of Harvard University from the Dean of the Faculty of Divinity, Harvard University. Located at <http://hul.harvard.edu/huarc/reshelf/AnnualReports.htm>.

¹⁶¹ Year-end Report for the academic year 1960-61, Harvard.

¹⁶² Hans Hofmann, *Religion and Mental Health: A Casebook with Commentary and an Essay on Pertinent Literature*, 310.

discernable difference between a religious and non-religious problem. “The border line between religious and nonreligious problems”, Hofmann stated, “is as hard to discern as a dividing line between religious symptoms of an underlying psychopathological problem and the psychopathological expression of a genuinely religious dilemma”.¹⁶³

It was inevitable that the “shrinking of time and space on our earth”, Hofmann wrote, “has brought to an end the era of self-contained isolationism of any profession. We depend on each other”.¹⁶⁴ For Hofmann, religion and psychology did have separate boundaries, their roles were not to be confused with one another. At the same time, religion and psychology were considered natural allies. Many intersections between the two were made in the writings published on the Harvard project. These included: what it meant to be human, our responsibility to ourselves, to others and to the world, dialogue, the inter-relational character of humankind and, the idea that positive psychological growth had many parallels with positive religious faith. Mental health was seen as the result of independence, critical thought and responsive action and membership within one’s community and society as a whole.

Religion could not be reduced to merely psychological phenomena and psychology could not pose as philosophical or religious reflection. Where the two met, where the two could engage in fruitful dialogue, was their presumed mutual ethical concern for the well-being of humanity. Factors that contributed to an individual’s mental health and well-being were many and varied. Just as members of the NYPG and Viktor Frankl had previously discussed, defining mental health from a wider context, one that included a community and societal ethical appeal for the future development of

¹⁶³ *Religion and Mental Health: A Casebook*, 332.

¹⁶⁴ Hofmann, “Introduction” in *Making the Ministry Relevant*, xvi.

humankind, made interdisciplinary dialogue urgent and timely according to those involved with the Harvard project. Mental health corresponded with a humane world and that, it was assumed, was the mutual concern and common ground for both psychologists and theologians. Again, it begs the question as to whether psychology was really designed for, or addressed, ethical issues. As we saw in chapter 3, Frankl believed psychology was not adequately prepared to delve into this arena.

Mental health, Hofmann believed, could conceivably provide the common ground between religion and psychology. Moreover, the intersection between religion and psychology might just reveal the bridge or balance between the freedom to discover oneself while simultaneously “molding the world in the image of its highest potential”.¹⁶⁵ If both minister and psychologist held such a view, how might their dialogue be mutually beneficial? A given minister, for example, might refer a particularly troubled member of [his] congregation to a psychologist or psychiatrist. Unlike the psychologist – at least at the beginning - the minister would have a vast body of knowledge about the parishioner. He would know, for example, a great deal about the parishioner’s family and about its social and economic contexts. Indeed, the minister’s dealings with the parishioner would likely extend to knowledge about the parishioner’s personality, including opinions and viewpoints that parishioner held. The minister would then be in a privileged position to assist the psychologist in a common goal. But do psychology and theology in fact have a common goal? Do ministers and psychologists see the mental health and well-being of the individual in the same way? Hofmann stated that the clergy’s “prime interest is in the restoration of an active member of [his] congregation” and that “[he] expects the

¹⁶⁵ Religion and Mental Health, 335.

psychiatrist's skill to work toward this end".¹⁶⁶ The minister saw the parishioner as an active member of a social institution and assumed that the psychiatrist, in order to treat a patient, isolated that individual's experiences and activities from the social world in order to focus exclusively on the inner self. "The psychotherapist", on the other hand, "views [his] patient as an individual in need of better self-realization and more satisfactory relation to [his] life setting. [He] focuses on the individual and [his] specific problems. Only in this light, and secondary to the individual's needs, comes the consideration of first [his] familial, then [his] social and professional, and then [his] religious affiliations".¹⁶⁷ The two fields would seem therefore to be quite distinct, as each "attends" to a different aspect of human need. Hofmann appears to have been envisioning a way to maintain these distinct roles and also to increase the dialogue, trust and mutual interests that psychology and theology held. Dialogue would highlight the multiple needs individuals and communities have as expressions of being human.

The Appeal for a Just and Humane World

Sounding very much like Viktor Frankl, Hofmann wrote, "every human being has the innate and irrepressible urge to make sense of life and to have this sense expressed through the unique character of [his] own personality and in the precise context in which [he] lives and works".¹⁶⁸ The emphasis Hofmann placed on personal meaning and purpose was coupled with the question of how these could be discovered and expressed both at the individual level and in the company of others. Hofmann was critical of a

¹⁶⁶ Hofmann, *Religion and Mental Health*, 330.

¹⁶⁷ *Religion and Mental Health*, 330.

¹⁶⁸ Hofmann, *Making the Ministry Relevant*, viii.

contemporary notion that people know how to live meaningful and ethical lives, that they know when and how to rely on their insights, knowledge and experience to do the right thing. Each individual supposedly had the internal capacity, fortitude and desire, to do this. A dangerous presumption, Hofmann declared and, like Frankl, one only needed to look at the increased demand for psychological help. “The psychiatrists’ offices”, Hofmann wrote, “are full of people who have lost their sense of meaning and purpose for their lives and, therefore, are confused. These people drift listlessly, pushed around by external value suggestions and vague external expectations with which they identify, since they do not know how to discover their inner sense of direction”.¹⁶⁹ What is interesting about this comment is Hofmann’s awareness of the fact that psychiatrists – as Frankl too had observed - were suddenly confronted with questions about the meaning of life, the meaning and purpose of an individual’s life, and how that individual could live meaningfully and ethically within the world. Equally interesting is Hofmann’s awareness that the external world played a large part in the mental make-up of the individual patient the psychologist or psychiatrist had seated before them. Trying to bridge the dignity of individual life and the common good seemed to be a recurring question without precise answers. Hofmann commented on this problem when he stated, “neither a democracy nor a church can survive if its constituency degenerates either into an amorphous conglomeration of isolated individuals or an equally undifferentiated mass of impersonal nonentities. In contrast to irresponsible individualism or mass anonymity, the people are inter-related, mutually responsive and responsible members of a group with many diverse gifts and functions”.¹⁷⁰

¹⁶⁹ Hofmann, *Religion and Mental Health*, 332.

¹⁷⁰ *Religion and Mental Health*, 333-334.

Hofmann thought the issue of mental health provided a meeting point between theology and psychology and he offered several specific areas for exploration. These included the overcoming of narcissistic preoccupation, love, independence, ethical and moral criteria, and religious values that were relevant to mental health. Much like Tillich, and especially Frankl, Hofmann saw our involvement with and response to the world as an ethical act. We had an obligation to be involved with society and be involved with ethical and moral decisions that affected us all. That kind of engagement, which Frankl saw as pivotal not only to psychological health and development but also to the healthy continuation of the human race, is also Hofmann's as he attempted to bridge the respective mandates of theology and psychology. Involvement with the world or, as Tillich would say, to be ultimately concerned, "can free a person from an undue, narcissistic preoccupation with [his] personal mental health or neurotic tendencies. A realistic religious faith can, therefore, allow a person to see [himself] and [his] difficulties in their actual proportions and dimensions".¹⁷¹ Contextualizing not only our lives within the greater world, but contextualizing our own problems, leads to a more realistic picture of our place and purpose in the world. Ideas such as these, common to Tillich, Frankl and Hofmann appear in Alfried Längle's theory of existential analysis as do notions of love. Our ability to love, ourselves as well as others, was a significant human characteristic, according to both Erich Fromm and Paul Tillich. Hofmann agreed and saw it too as a common thread between theology and psychology: "theology sees in [man's] ability to love the fruition of [his] faith in active and constructive participation in the affairs of [his society]. Psychotherapy recognizes in [man's] ability to love the key

¹⁷¹ Hofmann, *Religion and Mental Health*, 331.

toward [his] harmonious self-realization and satisfactory interaction with [his] world".¹⁷²

Positive psychological growth manifested itself in emotional maturity and the ability to think independently and critically. Hofmann suggested that religious faith, if it too were positive, would support a similar independent growth. Religious values that corresponded with mental health were those related to the change in attitude we were prepared to make towards ourselves, towards others and our sociocultural development. Orienting our existence away from mere inner reflection to creative and active involvement and concern with the world around us was, according to Hofmann, the result of positive religious faith and an expression of positive mental health. This same idea of fashioning our existence in an ethical manner towards the world around us is taken up in Längle's theory of existential analysis, which we will see in chapter 6.

At the heart of so many of these mid-twentieth century dialogues was a genuine and vocal appeal for social justice and a commitment to human potential. On one level, these dialogues assumed that human beings possessed an ethical foundation and were in fact oriented towards the common good. This did not imply that human beings always acted ethically but that they possessed an awareness of and a striving for change, a consciousness that Tillich had described in the NYPG meetings as the human ability to say, "I could have done better". Hofmann wrote, "human life-awareness begins with the elemental questions of 'why' and 'what for'. The very asking of these questions is the breath of human dignity. In a society where no one dares to ask them, or where anyone who does is ostracized as an unproductive dreamer, it is clear that we have already succumbed to a total organization under remote control".¹⁷³

¹⁷² Religion and Mental Health, 331.

¹⁷³ *Making the Ministry Relevant*, 12.

Underlying these dialogues between theologians and psychologists was the belief that external social and cultural influences of the twentieth century, notably the Second World War, and then through the 1950's the cold war with its very serious threat of nuclear war, had eroded humankind's ethical foundations, had eroded the human potential for purposeful striving. Dialogue and relationship, the cornerstones of humane interpersonal encounter, were seen as crucial human characteristics whose potential for expression had been suppressed under the weight of social change. Sounding very much like Frankl and others, Hofmann too clearly thought that psychology and theology had something to say to each other.

What continues to be fascinating are the complications arising from interdisciplinary dialogue. The influence of psychology, as we have seen in these three historical examples throughout the thesis, was (and continues to be) so pervasive that internal psychological life became the focus of overcoming the impersonal and dehumanizing social world. At the same time, there was a genuine concern that the focus of turning inward also blinded us to our moral obligation as human beings: a responsibility for the common good. These complications as we shall see in the next chapter, re-emerge in critical psychology when post-modern theory also gets tangled between advocating for individual potential and appealing to a collective goal of social justice.

Hofmann wrote,

"It goes without saying that such courage, strength and decisiveness is most needed in a time when the social, economic, and political ideologies have their power backed up by the threat of physical extinction. In this time of totalitarian terror and ruthless economic competition, it is urgently needed that there be a group of people who do not strive to impress their environment through their own qualities of wealth, intellectual

brilliance and personal achievements. Their secret is the rediscovery of their purely human ability to live meaningfully and to express their meaningful life in constructive living together”.¹⁷⁴

Conclusion

Hans Hofmann’s direction of the Harvard project entailed what was considered a visionary proposal for seminary training in light of contemporary twentieth century life. Without the final report, we cannot speculate on the extent to which the project’s mandate met its goals or implemented real change in curriculum and thinking amongst Protestant seminaries. This chapter’s aim was to extricate and highlight the tone and emphasis of the project in order to illuminate this little known but important historical project on the dialogue between psychology and theology. As we have seen in these first chapters, many psychologists and theologians committed themselves to very complex issues and questions. The devotion and intensity of their discussions attests to this commitment.

Hofmann outlined a two-fold problem that faced both psychology and theology when it confronted the topic of human existence. Speaking at the first symposium of the Academy of Religion and Mental Health in 1957, Hofmann stated, “what I call scientism, or the evolutionary illusion, is one expectation that has deluded modern [man] into believing that merely through [his] scientific discoveries and technological advances [he] could eradicate all [his] difficulties and re-create the world and the people in it into a close approximation of [his] ideal of the way things should be”.¹⁷⁵ Commenting on

¹⁷⁴ Hans Hofmann, “Immortality or Life”, *Theology Today*, 15, no. 2 (1958), 11.

¹⁷⁵ Hans Hofmann speaking at the 1957 symposium on “The Joint Role of Religion, Behavioral Sciences, and Medicine” in *Religion, Science and Mental Health* (New York: New York University Press, 1959), 54.

religion in the same presentation, Hofmann stated, “a second hope that has disappointed this generation is the belief that, by adhering to the dogmatism, liturgy, and moralism of traditional religion, we will produce [men] who are really human and will thus be able to build a new world full of better people”.¹⁷⁶

Throughout the twentieth century various interdisciplinary dialogues between theology and psychology implicitly and explicitly stated that neither discipline was well equipped to fully address what it is to be human. In an address to the 1954 meeting of the American Psychiatric Association, Dr. Kenneth Appel (later to become a contributor to the Harvard project) challenged the audience by stating, “if we analyze the brain into chemical constituents and energy transformations, does that mean that thought, feeling, aspiration, loyalty, devotion and love are not real? They are real aspects of experience though they cannot be weighed or measured. How much does loyalty weigh – or reliability? What are the radioactive equivalents of reliability, responsibility, devotion to the well-being of society?”¹⁷⁷ A decade later, following in the footsteps of the Harvard project, Dr. Edward Auer reminded his fellow participants at the 1963 symposium of the Academy of Religion and Mental Health, that Appel’s challenge to colleagues in the field of psychology and psychiatry had been considered visionary but “actually becomes more of a reality each day”.¹⁷⁸ The Harvard Project on Religion and Mental Health is situated amongst several visionary dialogues that took place beginning with the NYPG in the 1940’s and continuing with groups such as the Academy of Religion and Mental Health

¹⁷⁶ Hofmann, “The Joint Role of Religion, Behavioral Sciences, and Medicine”, 54.

¹⁷⁷ Kenneth E. Appel, “The Present Challenge of Psychiatry” *American Journal of Psychiatry* 111 (1954): 1-12.

¹⁷⁸ Dr. Edward Auer speaking at the 1963 symposium on “Moral Values in Psychoanalytic Education and Practice”. A summary of the symposium’s proceedings in Academy of Religion and Mental Health, *Moral Values in Psychoanalysis: Proceedings of the Sixth Academy Symposium* (New York: Academy of Religion and Mental Health, 1965), 19.

in the early 1960's, an organization Paul Tillich, Hans Hofmann and Viktor Frankl belonged to and through which they continued their enduring commitment to dialogue and expanding our discoveries and analysis of human existence. The Harvard project highlighted the potential of dialogue between theology and psychology, where each could learn from and enhance the other's commitment to the welfare of all human beings.

We now turn to several more contemporary voices within the discipline of psychology and discover that many of the mid-century themes of personal and collective well-being explored in this chapter and previous chapters are still very much with us.

Chapter Five

Contemporary Issues: The Challenge of Critical Psychology

“The therapeutic gospel celebrates all that promotes self-realization and condemns all that promotes psychological harm. This therapeutic morality, of course, focuses our attention on the private life, blinding us to the larger, public good”.¹⁷⁹

Introduction

In the previous chapter, we saw an illustration of theologians coming to terms with the rise in influence of psychological theory. The aim of the Harvard Project on Religion and Mental Health was to integrate psychological perspectives into theological education in order to make religion (specifically Protestant denominations) more relevant to parishioners and equip ministers with therapeutic tools to better serve their communities. At the same time, contributors to the Harvard Project voiced concerns about psychology's aim, purpose and growing influence on our perceptions of self and other. The quote that begins this chapter expresses a present-day but ongoing concern that psychology predominately focuses on the individual and neglects the community or social context in which individual well-being is simultaneously embedded. What does health and well-being really mean if it is stripped of context and relatedness? Extending

¹⁷⁹ Eva S. Moskowitz, 7.

Moskowitz's statement in this chapter's opening quote, does psychology have an obligation to bridge the lives of individuals with the public good? In treating individuals in therapy, should psychologists be not only aware of, but also obligated to acknowledge the patient's role in society? By the same token, to what extent is psychology already coordinating, if not manipulating, ideas of psychological health, development and individual fulfillment with cultural ideals of societal health and productivity?

On one level, psychology does both of these. Theoretical classifications of psychological health and ill-health infiltrate and influence society's general beliefs about: what is normal and acceptable human behavior; what are normal and acceptable displays of feelings or emotions; what constitutes appropriate behavior towards others, towards our family; what constitutes a positive and healthy relationship with another human being. Psychology does this and also ignores the extent to which it imposes rather grand and generalized ideology, if not morality, about human nature and society while claiming scientific neutrality to justify its aims. The implicit values, belief systems, philosophies, images and ideologies about human existence within psychology are, however, fascinating. While psychology grew in stature and influence throughout the twentieth century, so too did reflective discussions both within and outside of the discipline about the aim and function of psychology. The previous three chapters illustrated several of these interdisciplinary dialogues and discussions. In each case, concern was raised about psychology's increasing and exclusive alignment with scientific paradigms and whether that would ultimately negate psychology's ability to capture the essence of what it was to be human.

This chapter explores more contemporary voices from within the discipline of psychology that explore its aim, function and value. The chapter will focus on two things: first, we will look at a variety of voices within the field of psychology, focusing specifically on those within critical psychology, to get a general sense of the current arguments being made and the concerns raised; second, we will transpose Paul Tillich's concepts of faith as ultimate concern and the courage to be, and Viktor Frankl's notion of responsibility, onto some current debates within critical psychology. It is my contention that much of the current concerns about psychology – both within post-modern theory and without - about the meaning of health and well-being are lingering questions raised by mid-twentieth century theologians and psychologists that remain essentially unanswered. These questions and deliberations continue to resonate, albeit unconsciously, in the considerations of critical psychology.

Recurring Problems and Debates

What is psychology? What does it do? What are the implicit aims and assumptions that fuel psychological theory, studies and therapy? Is psychology science? Is psychology too reliant on empirical methodology? Is psychology in the business of ethics? Is psychology, as critics charge, an ahistorical, apolitical enterprise? How can psychology become more socially aware? Is there such a thing as a discernable "self"? Is psychology engaged in producing responsible citizenry? If these questions sound familiar, they are, for many contemporary debates within psychology are re-formulations of similar questions and concerns raised throughout the twentieth century. There are, however, several qualifying remarks that must be made: first, while post-modern

approaches like critical psychology, for example, have raised important questions and debates for the discipline of psychology, its critique that psychology has removed its object of study from relevant social, historical, political and ethical contexts is compounded by the fact that it too neglects historical debates, particularly dialogues with theologians or with the existential psychotherapies. Although the desire for interdisciplinary collaboration exists, many within the field of psychology continue to disregard collaborations with scholars in the fields of religious studies, theology or pastoral counseling. This may be due to psychology's tendency generally to ignore or minimize religious and theological contributions.

Second, many of the same ambiguous and complex questions that remained largely unanswered decades ago re-emerge within contemporary discussions and reproduce the same ambiguous positions. These include: trying to theoretically straddle notions of individuality and the collective (these being perpetually seen as diametrically opposed to one other); analyzing the impact that ideal images of human existence and behavior have on psychological theory; and finally, seriously reflecting on the extent to which Judeo-Christian ethics are re-translated into psychological theory. Many within the field of psychology of religion, for example, see these subtle ethical re-translations as ultimately problematic. This is so much the case that reflecting on any Judeo-Christian subtext within psychological theory and its potential for creative dialogue and analysis is considered biased scholarship and the "caretaking" of a Judeo-Christian perspective¹⁸⁰. Yet many so-called secular psychologists, particularly therapists, have written passionately in the last decade about psychology's neglect of issues such as responsibility, community, social justice and the care for others, issues grounded in a

¹⁸⁰ David Wulff, 11 – 32.

Judeo-Christian legacy. What moral and ethical subtext might these psychologists be unconsciously championing?

Why is psychology perpetually apprehensive about responsibility, for example? In his book *Soul Searching: Why Psychotherapy Must Promote Moral Responsibility*, author William J. Doherty provides an astute and somewhat humorous observation on the separation between psychology's promotion of individual rights and its simultaneous dismissal of individual responsibility and participation in community. He writes,

Although therapists do not tell clients to be politically passive, I see many therapists negatively interpreting their clients' public-service sensibilities and activities. One of Anna's therapists suggested that she was not so much serving other families through her teaching as trying vicariously to heal her own family. A friend told me of his meeting with a therapist just before he departed for Northern Ireland to work with war-oppressed children in the early 1970's. The therapist suggested that my friend was doing this work to deal with the internal war of his own childhood. A colleague curtailed her social activism after her therapist reframed it as a misguided effort to fill a hole inside herself by trying to save the world. I have heard these and other stories continually since I began speaking with other professionals about community commitment and began honoring these commitments among my clients. I met a social activist who builds community and focuses attention on social and environmental issues by means of community involvement projects. He has been told by two personal therapists, as well as by the many therapists in his friendship circle that his social activism stems from unfinished personal business. When he takes care of his personal business, so the line goes, he will stop acting out his missionary zeal in the world. All of these socially committed individuals appreciate that their personal issues are involved in their choice of work – as they are for all of us, including therapists. But they understandably resent being patronized and pathologized for their energetic work to make a difference in promoting the civil society. When clients tell us they want to change the world, we see them as cosmically co-dependent. A stint of good psychotherapy will send them back to their private world where they can criticize "society" without doing anything about it.¹⁸¹

Not only are individual expressions, experiences and responses of care towards others minimized, the personal meaning and value derived from these experiences in

¹⁸¹ William J. Doherty, *Soul Searching: Why Psychotherapy Must Promote Moral Responsibility* (New York: Basic Books, 1995), 98- 99.

addition to possible overlapping religious or spiritual commitments expressed by a client in therapy, continues to be seen through a lens of psychopathology.¹⁸² Again, the fact that many contemporary therapists have published books that address this problem attests to its continuation. In his book, *Minding Spirituality*, Randall Sorenson comments that therapists have to take a patient's expressions of spirituality, for example, seriously.¹⁸³ Further, "religion or spirituality", Sorensen continues, "has historically received problematic treatment from analysts as have few other expressions of cultural diversity, including socioeconomic status, race, ethnicity, gender, or sexual orientation".¹⁸⁴ Humanistic and Existential psychologist Kirk Schneider sees a danger in what he calls the "epistemological anarchism"¹⁸⁵ of post modernism. Advocating a "science of humanism"¹⁸⁶ within psychology to counter post-modern positions that "all beliefs are foundationless, all reality is socially constructed, and all views are equivalent in their essential value"¹⁸⁷, Schneider comments, "I fear for the children growing up in our post-modernistic cacophony; where will they learn emotional and intellectual depth, interpersonal commitment, and enduring values"?¹⁸⁸ These three therapists express what they see within the confines of therapy and it speaks volumes about what psychology perpetually wishes not to address. And yet conversations of responsibility, values and community concern and involvement are part and parcel of discussions many therapists have with their clients. A client's ethical posture is very much a part of therapeutic dialogue.

¹⁸² Randall Lehmann Sorensen, *Minding Spirituality* (Hillsdale, NJ: The Analytic Press, 2004), 25.

¹⁸³ Sorenson, 1.

¹⁸⁴ Sorenson, 1.

¹⁸⁵ Kirk J. Schneider, *Rediscovery of Awe* (St. Paul, Minnesota: Paragon House, 2004), 1.

¹⁸⁶ Schneider, 7.

¹⁸⁷ Schneider, 6.

¹⁸⁸ Schneider, 7.

Personality psychologist Robert Emmons feels “ultimate questions of meaning and existence, purpose and value, do find expression in one form or another”¹⁸⁹. These questions are being asked and expressed by clients in therapy yet psychology continues to ignore, minimize or pathologize these same expressions. Addressing his own confrontation with this, Emmons writes,

When I began my research program on goals, I had no professional interest in religious or spiritual issues. I was content to superimpose existing psychological categories onto what I was trying to understand. Yet because it is such a pervasive dimension of life, spirituality revealed itself repeatedly through the phenomena I was studying – personal goals, well-being, happiness, purpose, meaning, the psychology of possibility and human potential. ...As a personality psychologist who professed a desire to understand the person in his or her entirety, I was guilty of ignoring what for many people is precisely what makes their life meaningful, valuable and purposeful. I was ignoring people’s attempts to contact a deep and authentic source of striving, goals that came closer to defining who people say they are.¹⁹⁰

Contemporary approaches to psychology reflect many varying viewpoints on the discipline’s problematic response to its main object of study. We now take a closer look at critical psychology, a post-modern vocal and controversial contribution to many of the same questions and debates about psychology’s powerful place within our culture.

What is Critical Psychology?

Critical psychology has emerged from critical, social-constructionist, post modern and feminist theories, to name but a few. Critical psychology, as an approach, analysis and critique of the discipline of psychology is extremely broad and diverse. While critical psychology invites a multidisciplinary approach to this endeavor, it has yet to

¹⁸⁹ Robert A. Emmons, *The Psychology of Ultimate Concerns* (New York: The Guilford Press, 1999), 6.

¹⁹⁰ Emmons, 7.

fully engage with many disciplines that border psychological theory such as religious studies, theology or pastoral counseling, for example. Indeed critical psychology, to date, tends to ignore much of therapy itself in addition to the humanistic and existential psychotherapies. Indeed the scant commentary within critical psychology on the existential psychotherapies tends to confuse them with traditional continental existential philosophy. Because of this, existential psychotherapies are considered part of psychology's continuing problem, the elevation and promotion of individualism, and are therefore minimized. In fact, existential psychotherapies stress, and have always stressed, the inter-relational reality of human life. Despite these omissions and its lack of any formal or unified theory, critical psychology does, however, raise important questions about the implicit aims and assumptions of psychological theory and practice and why these in turn have not been subject to self-reflective analysis.

Current theories in critical psychology have argued that psychological theory has elevated the concept of the individual to a static unit of objective study. This elevation or compartmentalization has in turn created and perpetuated a discipline – psychology - that is both ahistorical and apolitical. Critical psychology proposes an acknowledgment of relation and context. This includes the implications of social, political and economic influences on “individual” experience. It has been suggested that psychology must become socially aware and this pushes psychological theory to confront its own moral aims, purpose and obligations.

The pervasiveness and power of psychological terminology in western culture is obvious. Psychology shapes how we see ourselves and how we see others. Psychology categorizes our behaviors and emotions and defines what constitutes health, “well being”,

normal and abnormal behavior. All of these categories and demarcations, presented by psychology as “science”, have however, deeper ethical, cultural and political implications. The “culture” of psychology posits more about who we should be, who we want to be, how we should behave, and how a society should conduct itself. Further, critics suggest that the extent to which psychology places its emphasis and focus on individual fulfillment results, as Eva Moskowitz remarks in this chapter’s opening quote, in a diminishing of interconnectedness and responsibility.

As we have seen in the previous chapters, the concern that psychology has increasingly turned a blind eye to ethical issues of responsibility, community, social justice and care is not new. Debates in the past about psychology and the nature of psychological help continually illustrated the tendency of psychology to ignore religious, spiritual and ethical issues despite the fact that clients seeking therapy - psychology’s main object of study after all - embody and express these issues in behavior, thought, emotion and experience. Contemporary debates about psychology continue to raise the perpetual and thorny question about the extent to which psychology should be engaged in these issues without becoming overt in directing those who seek psychological help, or theorists designing psychological studies, to follow prescribed ethical guidelines. Many critics, however, argue that psychology is already engaged in dictating what the “good life” is and underneath psychological categories of both health and disease, are fairly overt ethical yard sticks for behavior at the individual, family and societal levels.

Psychology’s tendency to promote the primacy of the individual and so-called “individual” experience over and above social, familial and historical contexts has created an ideal of human development. Edmund Sullivan states, “the ideal person

[within psychology] is considered a self-contained individualistic system rather than an interdependent system".¹⁹¹ The result can be seen in a pervasive ideology within psychological theory, one that assumes (if not creates) an ahistorical, apolitical individual who has the right, capability and freedom to self-actualize over the course of a lifetime. These individual rights, freedoms and capabilities are seen outside of any relational context and this begs the question as to whether these rights and freedoms are uniform and accessible to all. Increasingly divorced from the social world, psychological theories idealize and promote this self-actualizing individual whose goal is happiness and fulfillment (ambiguous terms at best). Positive psychological development revolves around an individual "feeling good" and any aspirations and/or contributions a person makes in the world rests on whether these activities will make ME happy and self-actualized. Frank Furedi adds that, "the feeling of contentment is increasingly seen as the defining feature of individual health...The emphasis which our emotional script attaches to feeling good about oneself is a distinct feature of contemporary culture. It is underpinned by an outlook that regards the individual self as the central focus of social, moral and cultural preoccupation".¹⁹² And yet, the existential analyst Ernesto Spinelli feels that what we deem to be "our problems" are in fact not our own "in any exclusively personal sense, in that they are not derived from some internal or intrapsychic set of conditions but, rather, exist at the nexus or meeting point between each person and the world of others which he or she inhabits".¹⁹³

¹⁹¹ Edmund Sullivan, *Critical Psychology and Pedagogy: Interpretation of the Personal World* (Toronto: OISE Press, 1990), 4.

¹⁹² Frank Furedi, *Therapy Culture: Cultivating Vulnerability in an Uncertain Age* (London: Routledge, 2004), 31.

¹⁹³ Ernesto Spinelli, *The Mirror and the Hammer: Challenges to Therapeutic Orthodoxy* (London: Continuum, 2001), 9.

While promoting individual freedom and self-actualization, psychological theory simultaneously constrains human behavior by assuming logical and predictive patterns of behavior and development. Such assumptions are, in turn, legitimized by scientific study and then perpetuated and applied through psychological practice. Indeed, these generalizations so legitimized creep into our public consciousness and influence everything from health care, to education, to social policy. Psychological theories and studies are believed to provide accurate accounts of who we are, how we think, how and why we behave in certain ways. We have come to believe that these theoretical categories and demarcations of human experience are real, fixed and never changing. We rarely question the conclusions of psychological studies and have become dependent on the results to dictate the direction of our lives. Voices within critical psychology, however, feel that statistical generalizations limit our potential knowledge of human beings at both the individual and societal levels. Tolman suggests that, “a psychology that deals with averages in the hopes of achieving generality through abstraction can never be relevant to the particular individual”.¹⁹⁴ Similarly, Holzman comments that the natural scientific model adopted by psychology is “unsuitable and ineffective when it comes to human social phenomena”.¹⁹⁵ Of even greater danger is psychology’s taking its own entrenched assumptions and priorities as scientific truth and “blindly reproducing them in the ideas of organized science, that is, in theory and method”.¹⁹⁶ Critics suggest

¹⁹⁴ Charles W. Tolman and Wolfgang Maiers, *Critical Psychology: Contributions to an Historical Science of the Subject* (Cambridge: Cambridge University Press, 1991), 5.

¹⁹⁵ Lois Holzman and John Morss, “A Decade of Postmodern Psychology”, in *Postmodern Psychologies, Societal Practice, and Political Life*, ed. Lois Holzman and John Morss, 5 (New York: Routledge, 2000).

¹⁹⁶ Tolman and Maiers, 5.

that psychological theory “organizes and legitimizes”¹⁹⁷ behavior and actions, that it intervenes in and acts to regulate lives.¹⁹⁸

Critical Psychology thus mounts a serious and important critique of the scientific pretensions of psychology. It also attacks a major tenet of psychology, the primacy of the individual. Sullivan links this to the “methodological individualism” of science itself.¹⁹⁹ The isolated, self-contained individual then lives a psychological life [created for him or her by psychology], “that is largely ahistorical and apolitical”.²⁰⁰ Further, the primacy psychology places on self-determination and self-actualization diminishes, some argue, the value of, and need for, “collaboration, caring and social justice”.²⁰¹

Some critical psychologists, reflecting post-modernism, even question whether there is any individual self left to be analyzed. They allude to an “erosion of the centered self”²⁰² and to a sense of self as being “constantly re-organized”.²⁰³ Both statements imply that personal identity is not static and cannot be clearly defined. As a consequence, interestingly, things that were traditionally associated with personal identity such as beliefs, values and meanings are equally subject to constant re-organization and become ambiguous. And yet, there are voices within critical psychology asking for a renewed emphasis on values of responsibility, community and care.

Psychology’s failure to recognize and incorporate the significance and impact of the relational reality between individuals and the world around them is another major

¹⁹⁷ Tolman and Maiers, 4.

¹⁹⁸ Holzman and Morss, 5.

¹⁹⁹ Sullivan, 4.

²⁰⁰ Isaac Prilleltensky and Geoffrey Nelson, *Doing Psychology Critically: Making a Difference in Diverse Settings* (Hampshire: Palgrave Macmillan, 2002), 6.

²⁰¹ Dennis Fox and Isaac Prilleltensky ed., *Critical Psychology: An Introduction* (London: Sage Publishing, 1997), 8.

²⁰² Kenneth J. Gergen, *The Saturated Self* (New York: basic Books, 2000), xiv.

²⁰³ Tod Sloan, *Damaged Life: The Crisis of the Modern Psyche* (New York: Routledge, 1996), 7.

criticism critical psychology has mounted against the discipline. For critical psychologists, there is no such thing as an autonomous individual or a unique subject that can be objectively isolated and studied apart from social, familial, historical and political contexts. Human beings exist in relation and cannot be understood apart from a “dynamic social reference”.²⁰⁴ Behavior, emotions, values and meanings, for example, have specific reference points as we direct ourselves, and are directed, both inwardly and outwardly. This concern is well voiced by existential psychologist Ernesto Spinelli when he suggests that the discipline needs to adopt self-criticism and social awareness. The “contextualizing presence of the world”²⁰⁵ needs to be made explicit in both theory and practice. The idea of social awareness implies moral aims and obligations, an area of inquiry rarely addressed in either psychological theory or practice.

Moreover, psychology’s emphasis on the self-contained, predictable individual negates human possibility and potential. Rubin feels that the emphasis on the individual within psychology results in the promotion of “...excessive self-centeredness and eclipses certain possibilities and features of subjectivity, such as self-transcendence and spirituality, or non-self-centric modes of being”.²⁰⁶ Prilleltensky similarly suggests that “too much self-determination degenerates into individualism and disregard for the well being of others”.²⁰⁷

In summary, critical psychology argues that the discipline of psychology has ignored cultural, political and historical context and has instead focused itself

²⁰⁴ Sullivan, 33.

²⁰⁵ Spinelli, 170.

²⁰⁶ Jeffrey Rubin, “Psychoanalysis is Self-Centred” in *Soul on the Couch: Spirituality, Religion and Morality in Contemporary Psychoanalysis*, ed. Charles Spezzano and Gerald J. Gargiulo, 82 (Hillsdale, N.J.: The Analytic Press, 1997).

²⁰⁷ Isaac Prilleltensky, “Bridging Agency, Theory and Action: Critical Links in Critical Psychology” in *Critical Psychology: Voices for Change*, ed. Tod Sloan, 73 (New York: St. Martin’s Press, 2000).

theoretically on western ideals of individualism. The primacy of value placed on individual fulfillment has in turn oriented notions of psychological health and well-being around the attainment, if not goal, of self-determination or self-actualization. The view that psychology has perpetuated a theoretical division between what sounds like the inalienable rights of the individual to self-actualize over and above our human obligations and responsibilities to “other” is voiced often within critical psychology. Richardson, Fowers and Guignon comment on the effect this valuing of individual fulfillment has on approaches to family therapy, for example. The authors comment on “the shift from the sociability and community-centeredness of the pre-modern family to the privatized modern family”.²⁰⁸ Further, this shift to an “inward focus has removed the family from its role as an integral part of the larger moral ecology tying the individual to community, church and nation and placed it at the core of the private sphere, whose aim is not to link individuals to the public world but to avoid it as far as possible”.²⁰⁹ These pervasive notions, Ian Parker adds, “structure[s] who we have become through contemporary psychological culture”.²¹⁰

For all its pointed criticism of psychology, critical psychology is not without its own problems. First, it contains a vast diversity in theoretical approach. That diversity naturally lends itself to many conflicting and contradictory positions. Second, those within critical psychology who advocate a post-modern deconstruction of the self and push psychology towards sociology, do so with an equally unreflective embrace of social constructionism to counter what proponents see as the western idealization of

²⁰⁸ Frank C. Richardson, Blaine J. Fowers and Charles B. Guignon ed., *Re-envisioning Psychology: Moral Dimensions of Theory and Practice* (San Francisco: Jossey-Bass Publishers, 1999), 75.

²⁰⁹ Richardson, Fowers and Guignon, 75.

²¹⁰ Ian Parker, “Critical Psychology: Excitement and Danger”, in *The International Journal of Critical Psychology*, Vol.1, No.1 (2001), 127.

individualism. Third, there are equally passionate voices within critical psychology who are appealing to a universal, and somewhat ethically charged, criterion for care, responsibility, community and justice within the realm of individual health and well-being.

Critical psychology has, on the one hand, raised serious criticism of psychology's claim to be a natural scientific methodology rather than a set of assumptions and beliefs that are historically and culturally situated. Psychology as such, the critics charge, is not a neutral enterprise; theorists and therapists are not and cannot be neutral. As Prilleltensky and Nelson point out, we should not believe that "research is neutral, that interventions are not effected by politics, and that we are just healers".²¹¹ What we define as "well being", for example, is fraught with cultural and political implications: an individual's well being, as Prilleltensky and Nelson argue, is "predicated on the well being of the family, which in turn is predicated on the well being of the community".²¹² And Parker suggests that "the discipline of psychology does not only rest in the mechanics of laboratory experimentation but also just as firmly in the lures of humanism [and] the personal incarnation for each of us..."²¹³

Thus, the vast territory of critical psychology also has divisions in its critique of psychology's mandate. On the one hand, critics argue that the idealization of the self and self-actualization diminishes social and ethical bonds. Yet critics of psychology also argue that the dependence on scientific paradigms and the resultant dependence on statistical generalities are inadequate in capturing the uniqueness of individual lives, if

²¹¹ Issac Prilleltensky and Geoffrey Nelson, *Doing Psychology Critically: Making a Difference in Diverse Settings* (Hampshire: Palgrave Macmillan, 2002), 6.

²¹² Prilleltensky and Nelson, 10.

²¹³ Prilleltensky and Nelson, 127.

not the essence, of human phenomena. This latter argument suggests that being human and understanding human nature is complex and perhaps cannot be both generalized and manipulated. This makes critical psychology difficult to gage in terms of its usefulness or impact.

A common thread, however, emerging from critical psychology does raise philosophical questions about the kind of world we live in and what our “individual” response should be. Criticism aimed at psychology’s emphasis on the individual has led to suggestions that psychology should acknowledge its part in social justice, social cohesion, altruistic and destructive expressions of human endeavor. Suggestions that “psychotherapeutic concern for the meaning of symptoms replaces questions about meaning or ultimate concern”²¹⁴, that psychoanalysis [in particular] seems to underestimate human possibility”²¹⁵, and that the “ambiguities and dilemmas of daily life...provide a better understanding of human experience and action”²¹⁶, reveal once again a strong moral tenor within the divergent voices of critical psychology.

Psychological inquiries that open the door to ultimate concern, the ambiguities of life and human possibility (which include meanings, values and faith) also open psychology to multidisciplinary responses and collaborations. For those of us familiar with the work of existential psychoanalyst Viktor Frankl and theologian Paul Tillich, this kind of collaboration and multidisciplinary response seems very well suited. Perhaps several voices from the past can contribute to the historical, religious, philosophical and ethical foundations of contemporary theory such as critical psychology.

²¹⁴ Jeffrey Rubin, 81.

²¹⁵ Rubin, 86.

²¹⁶ Ernest Schraube, “Reflecting on Who We Are in Technical World” in *Critical Psychology: Voices for Change*, 46.

Viktor Frankl and Paul Tillich: Foreshadowing Critical Psychology

Viktor Frankl and Paul Tillich each believed that psychology had to accept the ambiguous and paradoxical character of human existence. As we saw in chapter three, Frankl suggested that every psychological theory has a specific philosophy of human nature at its foundation. Every psychological theory contains some concept of what it is to be human and what constitutes psychological growth, development and well-being. Frankl's belief that psychological theories offered multiple interpretations of what it was to be human did not always find receptive audiences in the mid to late twentieth century when psychology, as a discipline, emphasized and sought scientific certainty. Ironically, contemporary voices within critical psychology have discovered the idea of multiple interpretations. Anderson comments:

Postmodern psychologies are not in search of true psychological knowledge or psychological knowledge as definitive reality, but, rather, invite the multiple interpretations of any psychological phenomenon. This position on multiplicity moves knowledge away from something that is fixed to something that is alive, and in and through the interchanges of the multiple viewpoints, something new and novel emerges specific to the participants and their local situations and circumstances. Thus the certainty and predictability of psychological knowledge goes by the wayside.²¹⁷

Frankl had similarly acknowledged that this "certainty and predictability", so favored by a discipline that aimed to be a science, manifested itself in what he called the foundational "concept of man" that essentially preceded theory. These foundational philosophies motivated and framed our psychological enquiries and these in turn

²¹⁷ Harlene Anderson, "Reflections on the Appeals and the Challenges of Postmodern Psychologies, Societal Practice, and Political Life", in *Postmodern Psychologies, Societal Practice and Political Life*, ed. Lois Holzman and John Morss, 202 (New York: Routledge, 2000).

influenced psychological studies and subsequent analysis. What is rarely addressed is the extent to which these foundational philosophies also contain our hopes and faith about who we are and what we are capable of. Paul Tillich expressed a similar sentiment when he wrote, “it is not always easy to distinguish the element of faith from the element of scientific hypothesis in a psychological assertion”.²¹⁸

Frankl, as we saw, argued that human beings were spiritual beings. We are spiritual beings because of our human capacity to experience the world, to contemplate and construct what is meaningful and valuable, to live in relationship, to take in the world on deep experiential and emotive levels. Human life is also marked by what Frankl termed our self-transcendence, our continuous movement outward beyond our individuality towards something or someone. Self-transcendence defies the scientific parameters and predictability of human behavior by suggesting an open-ended and continuous movement and striving beyond our present situation. The dynamic of relationship, dialogue, creativity, experience and transcendence that characterizes human life is what marks us as spiritual beings.

One of the aims of Frankl’s Logotherapy, as a therapeutic practice, was (and is) to help the individual become conscious of his or her responsibility. Frankl defined responsibility as a response-in-action. This was the ethical imperative of all human beings, an obligation to constantly reach out toward others, to be constantly engaged with others, and to be open to others. This implied a human striving, on an ethical level, to meet another individual in fellowship. Our existence points both inward and outward; to live humanely, and therefore ethically, is to respond to the world and participate in the world, beyond our individuality. Frankl linked this specific ethical goal with positive

²¹⁸ Paul Tillich, *Dynamics of Faith*, (New York: Harper & Row, 1957), 84-85.

psychological development, if not psychological health itself. Responsibility was shifted from a strictly individual accountability to a relational and shared response to the world. Individual responsibility was inextricably tied to the developments within culture. As we saw in chapter three, the value of the individual was not only linked to, but in fact dependent upon, community. Conversely, the health and welfare of community was of little value without the uniqueness and diversity of the individuals who filled it. The ethical challenge for psychology was, and remains, the acceptance and integration of this paradox.

Paul Tillich grappled with a similar paradox of individualism and universalism, between the dignity of an individual's life and the public good. Tillich linked what he termed the "courage to be as oneself" and "the courage to be a part". "The courage to be as oneself" is the "affirmation of the self as the self; that is of a separated, self-centered, individualized, incomparable, free, self-determining self".²¹⁹ Yet individuality is concurrently situated within a myriad of contexts and therefore the "courage to be a part", "...points to the fact that self-affirmation necessarily includes the affirmation of oneself as participant".²²⁰ A psychological and ethical principle also lies at the foundation of Tillich's concept of the "courage to be a part". Tillich suggested that it is the individual's participation in the "creative activities of society"²²¹ that confronts anxiety and reduces its debilitating effects. Much like Frankl, psychological health and development for Tillich, at both the individual and cultural level, was an embodiment of two seemingly contradictory activities: actualizing one's unique potentials and being an integrated member of society.

²¹⁹ Paul Tillich, *The Courage to Be* (New Haven: Yale University Press, 1980), 86.

²²⁰ Tillich, "The Courage to Be," 89.

²²¹ Tillich, "The Courage to Be," 111.

Tillich ties this in with his concept of faith as ultimate concern. Tillich saw faith as an inherently human characteristic. Faith is the acceptance of the contingencies and multiple dimensions of human life. Faith transcends both rational and non-rational aspects of human expression. Faith is cognitive and emotive, certain and uncertain, cast with risk and doubt. While some within critical psychology argue that an erosion of “truths” and “meaningfulness” in modern times, ultimately affects our sense of self, community and, by implication, faith, Tillich would argue that faith does not mean “truth” but rather, to be ultimately concerned. Such a definition of faith implies that the individual is continually in relation, is actively engaged with the world, concerned and responsible for its inhabitants and, open to the possibility of change. To be ultimately concerned is an individual response, but that response emerges from a unique and centered self that is simultaneously partnered with a response to the world of collaboration and responsibility. To be ultimately concerned, according to Tillich, is an “act of the total personality...the most centered act of the human mind”.²²² In Tillich’s terms, it is an act of faith. Faith entails motivation towards dialogue, towards relationship, toward community. It implies possibility. It involves a relationship between “...the one who is concerned and his concern”.²²³

Ultimate concern is not merely subjective motivation or belief, it is directed and has context. Tillich states, “...since faith leads to action and action presupposes community, the state of ultimate concern is actual only within a community of action.”²²⁴ To be ultimately concerned, to have faith, involves a “centered self” freely responding, deciding and simultaneously participating in relationship. Ultimate concern describes our

²²² Tillich, *Dynamics of Faith*, 4.

²²³ Tillich, *Dynamics of Faith*, 9.

²²⁴ Tillich, *Dynamics of Faith*, 117.

human ability to have faith, to trust, to receive and to grow. It also implies constructed, shared and perpetuated values. It implies moral obligations and responsibilities, whether we always act morally or not, whether we act in a just fashion in every encounter or not. “The moral imperative”, Tillich stated, “is the command to become what one potentially is, a person within a community of persons”.²²⁵ Extended to ideas of psychological health and development, the potential that resides within each unique individual both depends upon and shapes the potential that resides within a community of persons. Ultimate concern embodies this relationship or concurrent dependency. Tillich suggested that all human activity is a symbolic representation of the boundary between finitude and infinitude.²²⁶ Possibilities are sometimes actualized into concrete finite situations then flow again into possibilities. “Faith”, Tillich states, “is not a matter of the mind in isolation, or of the soul in contrast to mind and body, or of the body, but is the centered movement of the whole personality toward something of ultimate meaning and significance”.²²⁷

Two further quotes from Anderson taken from a recent collection of essays in critical psychology are worth examining as they are, once again, very reminiscent of Frankl and Tillich’s thematic emphasis. In the first example, Anderson refers to “post modernism’s attempt to promote dialogue, value difference, entertain uncertainty, and self-critique – widening our possibilities – rather than to promote monologue, sameness, and certainty – narrowing our possibilities”.²²⁸ As I read this sentence I began substituting Tillich’s language: “to promote dialogue” became Tillich’s idea of

²²⁵ Paul Tillich, *Morality and Beyond*, (New York: Harper & Row, 1966), 19.

²²⁶ Paul Tillich, *On The Boundary*, (London: Wm. Collins Sons and Co. Ltd., 1967), 98.

²²⁷ Tillich, *Dynamics of Faith*, 106.

²²⁸ Anderson, 202.

encounter, the act of “coming from both sides, of meeting in a common situation, of participation in this situation by becoming part of it”.²²⁹ The phrase to “value difference” became the uniqueness and dignity of individual life. The phrase to “entertain uncertainty” became Tillich’s notion of the ambiguity of life. Human existence, according to Tillich, was ambiguous at every moment. The phrase “widening our possibilities” became Tillich’s moral imperative that actualizing our potentialities was, once again, “the command to become what one potentially is, a person within a community of persons”.²³⁰

In the second example, Anderson refers to postmodern concepts stating, “An identifiable family trait within this diversity is the distinction that language and knowledge are relational and generative. That is, reality – the meanings that we give to the events, experiences, people, and things in our lives – is communally constructed and inherently susceptible to transformation”.²³¹ I immediately thought of Frankl’s idea that we continually search for and construct meaning within our lives. The search for meaning (the will to meaning) implies a relational and contextual interdependence between the individual and the world around him or her and hence suggests the communal construction of meanings. We are engaged simultaneously as individuals and as community in a continuous process of discovering meaning, solidifying those meanings through decision, action and creativity, and then beginning the process anew. The idea that meanings, both individual and collective, are susceptible to transformation

²²⁹ Paul Tillich, *The Spiritual Situation in Our Technical Society*, ed. J. Mark Thomas (Macon Georgia: Mercer University Press, 1998), 66.

²³⁰ Tillich, *Morality and Beyond*, 202.

²³¹ Anderson, 202.

fits Frankl's oft repeated phrase that meanings change from moment to moment and from hour to hour.

As we have seen, critical psychology encompasses a wide theoretical terrain. It incorporates a varied spectrum of approaches to psychology, both from within the discipline and from without. Much of the debate within critical psychology centers on issues of individuality and community, or put another way, on issues of particularity versus universality. While some debate focuses on the scientific universalism of psychological theory to the detriment of individual expression and uniqueness, others debate the cultural, religious and political dangers of universalism and posit, if not an advocacy of individualism, certainly an advocacy of particularity and uniqueness.

In the previous chapters, we saw illustrations of several historical debates and dialogues that attempted to bridge but ultimately accept these paradoxes. Mental health and well-being for theologians and psychologists alike meant transcending strict theory or dogma and collaboratively focusing their attention, expertise, faith and hope on an appeal to the common good, to social justice, and peaceful co-existence. As we saw in chapter 3, Frankl was passionately vocal that psychological theory should view the individual as more than mere organism, more than a social construction. It was imperative that the value of the individual, Frankl stressed, be upheld considering the very real possibility of human extinction. Frankl's views resonate today as we in the west struggle to balance our devotion to individual expression while recognizing the simultaneous need for community and partnership. These sentiments also resonate with current debates within critical psychology. Frankl's contention that Logotherapy attempts to answer the psychotherapeutic needs of our time reveals his clear belief –

similar to that of critical psychology - that psychological theory is historically and culturally situated. The implicit assumptions and underlying philosophy of any given theory emerge from a particular historical point and are further laden with the myriad cultural contexts that influence it. Frankl is also saying something about the scientism pervading psychological theory and practice through the twentieth century. His statement clearly rejects a universal scientific model to analyze human beings but the statement also calls on a universal response that is morally and ethically situated in community, care and compassion. Frankl's statement contends that individual expression is particular, unique and of value, while simultaneously pointing to an implicit message of social interconnectedness and responsibility.

Paul Tillich weighed these same ambiguities and realities of human existence. As a theologian and religious philosopher, Tillich engaged in psychological discourse to enrich his thinking. It has been suggested that Tillich's theology was political.²³² I believe this to be true and I believe Tillich's psychology was also greatly politicized. I would like to cite the following two examples. In a section on the "Ambiguities of Humanism" in Volume Three of *Systematic Theology*, Tillich debates the possibility that a culture could exist where individual potentials could be fully realized. Leaving aside Tillich's argument that human beings are finite beings and therefore argumentatively incapable of fully actualizing their potentialities, Tillich offers the following statement, "but even worse, the human condition always excludes – whether under aristocratic or democratic systems – the vast majority of human beings from the higher grades of

²³² Ronald H. Stone and Matthew Lon Weaver ed., *Against the Third Reich: Paul Tillich's Wartime Radio Broadcasts into Nazi Germany* (Louisville: Westminster John Knox Press, 1998), 6.

cultural form and educational depth”.²³³ This statement is particularly interesting in light of critical psychology’s claim that psychological theory and therapy have entrenched themselves within a very particular western socio-economic context. Several critiques of psychology from this angle have questioned the universality of notions such as self-actualization, or the actualization of potentials, without reference to the “facts” or contexts of an individual’s life, and whether theoretical assumptions about how one self-actualizes can really be salient across differing economic realities. Transposed onto current debates, Tillich’s statement reminds us of whom psychology serves and whether psychology is sufficiently self-aware of the politicized ideologies and assumptions it conveys about who we are and how we are to develop “normal” and fulfilling lives.

The second illustration of Tillich’s political psychology comes from a radio address he broadcast from the United States to Germany during the Second World War. From a broadcast entitled “Justice and Humanity”, Tillich states, “... Your rights are the acknowledgment that you are a person, that you have dignity that is inviolable, that you are a uniquely irreplaceable self. They are the acknowledgment that you are human. Deprivation of justice is deprivation of humanity. Human dignity is one with its justice. Without dignity, representatives of the German people have dispensed with their rights and, with that, have surrendered the dignity of the nation and every single individual. Reclaim your rights again, German people, and with it yourselves!”²³⁴ Although the quotation conveys the understandable emotions of the time in relation to the audience to whom it was directed, it also reveals the nuanced, ambiguous and difficult debate around the dignity and uniqueness of individual expression, the links between individual and

²³³ Paul Tillich, *Systematic Theology Vol.3* (Chicago: University of Chicago Press, 1967), 86.

²³⁴ Stone and Weaver, 27.

collective responsibility, the idealism of individuality and community and individual and communal faith and hope. Within the historical and political context of this speech, Tillich conveys idealism, hope, faith and a moral imperative that suggest a possible path through the debate. Such a path would address individuality and community, individual responsibility and collective social justice. Such a path would navigate the relationship between reality and possibility.

The relationship between reality and possibility conveyed in so much of what Frankl and Tillich wrote posits an awareness and responsibility in partnership with faith and hope. The ethical imperative to become a person in a community of persons, as Frankl and Tillich similarly express, suggests self-awareness and response, reflection and decision, a dialogue with and relationship to, the world around us. It requires us to constantly juggle, and therefore debate, the desire for equality and peace, the freedom of individual as well as community or cultural expression. How do we account for an individual's ability to believe, to have unwavering faith, to have one's faith shattered, to create, to dream, to destroy, to imagine, to love, to hate, to hope, to despair? How do we account for an individual's ability to construct meaningful ways of living and experiencing? When an individual in therapy describes experiences of meaninglessness, of love, of anger, or joy, do these experiences reside solely within the realm of psychology when psychological theory is itself ambiguous and changing? How do we account for the fact that these same individual experiences and expressions are simultaneously culturally situated and are manifested collectively in the growth, development, faith, destruction, values and social justice of nations, groups or cultures?

Post-modern theories such as critical psychology are contributing greatly to how

we see the discipline of psychology and remind us of the importance of questioning the aim and purpose of psychological theory and therapy. Is there a discernable centered self, a self that expresses identifiable experience uniquely separate from social, historical and political contexts? Is therapy engaged in the purely subjective experiences of the client or is it a tangled discourse of subjective experience, feelings, meanings and beliefs all of which influence and are influenced by social, political, historical, religious and ethical contexts? This also raises the question as to the extent to which psychology should in fact be engaged in these discussions. If, as the critics charge, psychology perpetuates a strong westernized vision of individualism and excludes notions of relation and community well-being from its psychological categorizations, we come back to a recurring question of whether psychology excludes itself from social responsibility and why? If, as the contemporary critics charge, psychology should be engaged ethically in the well-being of a community does critical psychology, for example, assume that psychology should at some level be facilitating socially aware and socially engaged citizens? Is a therapist, in fact, engaged in much broader issues when a client expresses their belief systems, when they express what is meaningful and valuable, when a client situates their experiences simultaneously with the experiences of family, work, community and broader social contexts? These contexts themselves are also continually shifting and changing in harmony and at odds with the changes and shifts in what constitutes "self". Is an "individual" in therapy expressing unique experiences and unique responses to these contexts? What should psychology be engaged in and should psychology situate itself theoretically and therapeutically in the realm of ethics, politics, social justice and religion? These recurring questions also remind us that current debates

have much to gain from those who have previously explored psychology's place within our culture.

Tillich believed that all dimensions and expressions of culture co-existed and influenced one another. His theological and philosophical writings embraced a relationship and dialogue with psychology, sociology, anthropology, science, the arts, history and politics. Although Tillich had a keen interest in psychology, and integrated psychological terminology into many of his ideas, he was critical of the increasing influence and implication of the natural sciences on psychology. Tillich stated, "it is the temptation of science to transform everything encountered, including man, into an object that is nothing other than an object. Obviously, every scientific inquiry has an object opposite the inquiring subject. And the more deprived a being is of subjectivity, namely, spontaneous reactions, the more precisely can it be analyzed".²³⁵ Tillich suggested that, "under these pressures, man can hardly escape the fate of becoming a thing among things he produces, a bundle of conditioned reflexes without a free, deciding and responsible self".²³⁶

We recall in a paper given to the New York Psychology Group in 1943, and quoted in chapter 2, where Tillich described the "eccentricity of the human mind" which he claimed made it impossible to formulate a "closed system" in relation to being.²³⁷ In many respects Tillich had a particular notion of the self far closer to that of the critical psychologists than to that of conventional or mainstream psychology. For Tillich, a

²³⁵ Tillich, *The Spiritual Situation in Our Technical Society*, 81.

²³⁶ Tillich, *The Spiritual Situation in Our Technical Society*, 45.

²³⁷ Paul Tillich, NYPG, May 19, 1943.

person was a multidimensional unity that requires a multidimensional response,²³⁸ not at all isolated and divorced from the world. Tillich described an individual's growth as contingent upon relationship with others. He stated, "a person becomes a person in the encounter with other persons, and in no other way".²³⁹ Human existence should therefore be seen as an open and relational process. And yet Tillich believed there was nonetheless, a "centered self", not isolated but in continuous relation with the world. A "centered self" that was capable, he stated, of a "centered reaction [which] goes through deliberation and decision".²⁴⁰ Individual deliberation and decision begins by encountering, taking in, reacting to and then moving outward toward encounter again, through participation and response. "Only [man]", Tillich wrote, "has a completely centered self and a structured universe to which he belongs and at which he is able to look at the same time".²⁴¹ The "centered self" is a unique and individual expression or reaction. A decision, a glimpse of possibility, our imagination, the ability to reflect on our creative endeavors, all of these are uniquely human capabilities and are expressed individually through the unity of psychic, physical and spiritual dimensions. Tillich asks us to accept the paradox that we are individually free to some extent and that such possibility also has social reference and relation. Possibility points to a capability of transcending immediate concrete situations. This implies both individual and cultural transcendence. To transcend is to move beyond the immediate towards relationship,

²³⁸ Tillich, "The Meaning of Health", in Paul LeFevre ed., *The Meaning of Health: Essays in Existentialism, Psychoanalysis and Religion*, (Chicago: Exploration Press, 1984), 167.

²³⁹ Paul Tillich, "Existentialism and Psychotherapy", in *The Meaning of Health*, 163.

²⁴⁰ James B. Ashbrook ed., *Paul Tillich in Conversation: Psychotherapy, Religion, Culture, History and Psychology*, (Bristol Indiana: Wyndham Hall Press, 1988), 136.

²⁴¹ Paul Tillich, *Systematic Theology Vol. II*, (Chicago: University of Chicago Press, 1967), 60.

towards dialogue. Human life is therefore marked both by its possibility and the implied ethical responsibility that exists in encounter.

Echoing Tillich's views, albeit unknowingly, some voices in critical psychology express a clear ethical direction for psychology. The direction psychology must take, according to Prilleltensky, is the balance between the individual and the collective. The psychological aim of "wellness" must be both personal and collective. Prilleltensky states, "the liberation of the self is intimately connected to the liberation of the other. The personal well-being of the individual is predicated on the availability of communal resources such as health and safety. Caring only about individual clients or friends or relatives is insufficient to secure a caring society".²⁴² Community and individual "wellness" do need to be seen side by side as each is in constant interplay with the other. In addition, a critical approach to psychology needs to continually raise the large and ambiguous questions such as what constitutes "wellness" and what are the implications of exposing clear moral directives within the discipline of psychology? Prilleltensky goes on to ask, "don't we need to know under what circumstances caring and compassion and fairness are likely to be upheld?"²⁴³

It is fascinating to see questions of care, of individual and community health and well-being continually re-emerge. These questions remain with us, they remind us that we are continually caught between our aspirations for universal answers and the ambiguous realities that challenge and confront us at each moment. Much like the discussions during the New York Psychology Group meetings where members asked

²⁴² Isaac Prilleltensky, "Emancipation, Epistemology, and Engagement: Challenges for Critical Psychology", in *The Journal for Critical Psychology*, 107.

²⁴³ Prilleltensky, "Emancipation, Epistemology, and Engagement: Challenges for Critical Psychology", 108.

how compassion, justice and the care for others could be universally valued and upheld, Prilleltensky similarly asks whether we can truly know what these “circumstances” are that might lead to a communally shared ethic of care. What remains ambiguous and elusive are the continually shifting contexts that these circumstances are dependent upon. Does Prilleltensky’s very valid and important question not also raise the question of universal values, something shared by all human beings because we are human beings, a faith in humanity so that caring, compassion and fairness are indeed upheld over time and across shifting contexts and circumstances? This kind of enquiry, emerging from critical psychology, resonates with theological and psychological dialogues from the past that sounded urgent appeals for social justice.

Certainly one can argue that Tillich’s concept of ultimate concern, for example, posits a Christian expression and moral directive that points to a universal faith in humanity; a faith that transcends both individuality and the particularities of community. Yet one can also argue that critical psychology, even in its critique of psychology’s aim and purpose, advocates some form of ultimate concern for the welfare of all. Again, we are left with those areas that have yet to be fully reflected upon, the extent to which even secular post-modern critique harbors Judeo-Christian ethical foundations. As we recall, the members of the New York Psychology Group wondered in June of 1943, whether a concept advocating the unity of humankind could develop from an ideology into a reality?²⁴⁴ We are still grappling with these questions.

²⁴⁴ Members Discussion, NYPG, June 4, 1943.

CONCLUSION

In the previous three chapters, we discovered many historical voices who foreshadow much of critical psychology, indeed much of contemporary psychological debate. Similar questions continue to be raised about what psychology is, whom it serves and whether it adequately addresses what it is to be human.

Current questions being asked by critical psychology center on the ambiguity that emerges in psychological theory and therapy when they confront the cultural, religious, ethical, economic and political contexts that both influence theory and are influenced by psychological paradigms. Tillich and Frankl's dialogue between theology and psychology provides a possible bridge and points of connection amidst this ambiguity. If human existence is, as Tillich describes, multidimensional, then the response must necessarily be wide and varied. The relationship between reality and possibility conveyed in so much of what both Frankl and Tillich wrote posits an awareness and responsibility in partnership with faith and hope. Tillich's idea that the individual becomes (or develops) within a continuous, reciprocal and mutual relationship between self and world, between self and "other", is a precursor to critical psychology's argument that psychology as a discipline has stressed a specific and static concept of the individual and ignored the social, political, historical and religious contexts that contribute to "becoming". Further, Tillich's concept of ultimate concern implies an ethical and responsive dialogue between self and world. Similarly, contemporary therapists and theorists in psychology who are attempting to discuss the ethical overlays of individual and community growth, development and well-being, have much to gain from historical interdisciplinary dialogue and those who were ultimately concerned by many of the same

things. The fact that many of the same questions re-emerge must indicate similar and continuing aspirations and hope about human development.

Where might these questions and debates, both historical and contemporary, lead in terms of therapy itself, for example? As we saw at the beginning of the chapter, many contemporary therapists have questioned psychotherapeutic traditions that essentially ignore a client's experiences and expressions of faith, hope, a commitment to others and to the world. Tillich stated that the "interdependence of [man] and [man] in the process of becoming human is a judgment against a psychotherapeutic method in which the patient is a mere object for the analyst as subject".²⁴⁵ Here too Tillich was foreshadowing much of the scrutiny of therapy by critical psychology, in particular the assumed neutrality and objectivity of the therapist towards his or her client. If Frankl believed that a patient had "the right to demand that the ideas he [or she] advances be treated on the philosophical level", in 2006 we might expand this by suggesting a patient has the right to demand that the ideas he or she advances be treated in light of the wide and varied contextual levels in which he or she lives and that the therapist be open to such **dialogue**.

We now turn to the contemporary theory of existential analysis, a possible answer to Hans Hofmann's search for a psychological theory that embodies the "real human factor".

²⁴⁵ Tillich, "Existentialism and Psychotherapy" in *The Meaning of Health*, 163.

CHAPTER SIX

In The Midst Of This World I Discover Myself Unmistakably²⁴⁶: Alfried Längle's Theory of Existential Analysis

**In all the ruin there remains the potentiality of [man himself].
Only the individual, whether in public or private, can provide
the spark for the rebuilding of real community, which may
again breathe a soul into the technological world of
industry...It is not true that the individual has
disappeared...Yet he needs others to be able to remain
[himself].²⁴⁷**

Introduction

Human life is simultaneously singular and communal, unique and shared.

This chapter's opening quotation, written by Karl Jaspers in 1959, remains powerfully
pertinent today and resonates with Alfried Längle's²⁴⁸ contemporary theory of existential

²⁴⁶ Alfried Längle, "The Search for Meaning in Life and the Existential Fundamental Motivations",
International Journal of Existential Psychology & Psychotherapy 1, Issue 1 (July 2004): 34.

²⁴⁷ Karl Jaspers, "The Individual and Mass Society", in *Religion and Culture: Essays in Honor of Paul
Tillich*, ed. Walter Leibrecht, 43 (New York: Harper & Brothers, 1959).

²⁴⁸ Dr. Alfried Längle, M.D, PhD. is an analyst in private practice in Vienna, Austria. He is founder and
president of the International Society for Logotherapy and Existential Analysis. Dr. Längle worked with
Viktor Frankl for 10 years and developed the theory of Existential Analysis during that time. He teaches
frequently at universities in Austria, South America and Moscow. He gives frequent lectures and conducts
training seminars in Existential Analysis throughout many European countries, in addition to Australia,
Canada and the United States. This chapter is based on my knowledge of Existential Analysis from
lectures, seminars and conference workshops Dr. Längle conducted and which I attended in Vancouver,
British Columbia between 2002 and 2005; regular personal correspondence between Dr. Längle and me
from 2002 to the present; meetings with Dr. Längle in Vienna, Austria in May 2003 and again in May of

psychotherapy. The potential for individual and cultural transformation, Jaspers warns us, lies within a shared commitment that values the dignity and uniqueness of the individual while acknowledging that human life is also necessarily dependent and interconnected. Alfried Längle's contemporary theory of existential analysis²⁴⁹ is a contemporary argument for this interdependence of self and world. Human existence, Längle states, is fundamentally "dialogical".

The purpose of this chapter is to focus, albeit briefly, on Längle's theory and therapy of existential psychotherapy as an illustration of the continuing and enduring themes about what makes us truly human and what it means to live a psychologically healthy life. In order to illustrate this, the chapter will focus on three points. First, we begin by questioning our assumptions of what therapy should provide. The western world has become increasingly saturated with therapy culture and this has had a profound impact on how we see ourselves and how we gauge our lives. Second, we give a brief overview of existential analysis including its emphasis on the dialogical nature of human existence and thirdly, conclude with an outline of what Längle calls, the four fundamental existential motivations. It is my contention that much of the debate and belief about human potential contained in the historical dialogues we have looked at in the previous chapters - and that transcended the disciplinary boundaries of psychology and theology - continues in some quarters of contemporary psychological theory. Historical dialogues that tackled such questions as the purpose of psychology, pleas for a humane approach to care, constituents of psychological health, notions of well-being and finally, questions about our capabilities and responsibilities as human beings, remain an untapped resource

2004; and finally, several translated articles on existential analysis which Dr. Längle kindly asked for my editorial assistance on. I am indebted to his generosity, mentorship and support of my interests and work.

for post-modern theory. Existential analysis, by contrast, is theoretically grounded in dialogue and is therefore very much open to interdisciplinary collaboration. Längle's theory of existential analysis provides a valuable bridge to such collaboration in the following ways: first, the "dialogical" encounter between therapist and client, fundamental to the therapeutic practice of existential analysis, exposes the depth and ambiguity of human encounter; second, the focus on human encounter and dialogue opens the door to discussing and analyzing the ethical subtext contained in human potential and responsibility. These two points are so strikingly similar to the issues raised in the historical dialogues between psychologists and theologians whose aim was to foster an ethically deeper and more responsive approach to both the study and care of human beings. Erich Fromm once wrote,

Psychology can show us what [man] is not. It cannot tell us what [man], each one of us, is. The soul of [man], the unique core of each individual, can never be grasped and described adequately...the legitimate aim of psychology thus is the negative, the removal of distortions and illusions, not the positive, the full and complete knowledge of a human being.²⁵⁰

Längle's theory of existential analysis may be one contemporary psychotherapeutic approach that focuses on exposing the positive potentials and possibilities that lie within the enduring mystery of human existence.

We saw in the previous chapter how some post-modern debate within critical psychology continues to weigh individuality against the social world. Is there such a thing as "I", separate and discernible from social referents? Can psychology, the critics suggest, uphold a notion of the self that is distinguishable from the influence of cultural, political or economic constructions? Is our notion of the individual self merely a social

²⁵⁰ Erich Fromm, "The Limitations and Dangers of Psychology" in *Religion and Culture: Essays in Honor of Paul Tillich*, 33.

construction? Those engaged in critical psychology, for example, are attempting to re-conceptualize psychological theory by scrutinizing its fundamental assumptions and biases. By doing so, the question arises as to psychology's elevation of the self and perpetuation of individuality distinctly separate from the myriad contexts in which the self resides, contributes to and is influenced by. We also saw that despite the important issues and questions critical psychology has raised for the discipline itself, some within critical psychology fall prey to simply choosing the other end of the spectrum and prioritizing social constructionist theory, or sociology itself, to analyze human existence. Once again, raising legitimate concerns about psychology's aim and purpose is necessary and fruitful but deconstructing psychology's human subject negates any possibility of dialogue or transcending theoretically constructed opposites: individuality and community. Situating human existence within an inter-relational foundation opens a path to dialogue, which in turn enables us to discuss and analyze individual and community potential with equal commitment.

Existential analysis does not de-construct or negate a concept of individuality, rather, this contemporary therapeutic approach bridges the uniqueness and dignity of individual existence with the social world. There is, according to existential analysis, a discernible and unique self simultaneously embedded in the social world. Jaspers' comment at the beginning of this chapter reminds us of the need to value individual life sufficiently in order to enable each of us to take on what Tillich saw as our moral obligation: to become a person within a community of persons. This entails our creative potential, "the spark" that Jaspers refers to, being relationally directed outward into the world. As we saw at the beginning of chapter 5, some contemporary therapists have

resisted the post-modern urge to render individuality a mere social construction and are paying attention to the words, stories, actions and feelings of their clients as potentially ethically meaningful relationships and dialogues with the world. Many contemporary therapists are devoting their attention to preserving the potentiality that exists in the individual “spark” and to ask how our preservation of humanity within psychological theory and therapy might transcend outward into an ethic of good will and community. At the 2004 meetings of the International Network on Personal Meaning, Paul Wong commented on what an existential psychotherapy could mean for the 21st century. Acknowledging the range of theoretical contributors to the field of existential psychology, Wong narrowed in on some general characteristics. Wong stated, “existential psychology needs to become the practical psychology of everyday living...shifting through the colliding narratives and contradicting ‘facts’, existential psychology seeks to address fundamental questions relevant to the survival of humanity and the well-being of every individual”.²⁵¹

What Should Therapy Provide?

We might extend Erich Fromm’s comment about what psychology can or cannot show us and ask: what do we assume therapy should provide? Within the vast array of psychological theories and psychotherapies available, those who provide therapy and those who seek it have assumptions about what therapy is and what it should provide. Underneath these initial views, lie further assumptions about what constitutes mental health, well-being and a fulfilling existence. What criteria do therapists use to gauge the

²⁵¹ Paul Wong, “Existential Psychology for the 21st Century”, *International Journal of Existential Psychology & Psychotherapy* 1, Issue 1 (July 2004): 1.

mental health and overall psychological well-being of their clients? Are these criteria based primarily on the theoretical framework the therapists work within? To what extent does a therapist assess another human being's psychological well-being and then convey alterations or adaptations for the client to follow in order to maximize an already elusive term such as well-being? Similarly, what criteria does the client rely on to assess the state of his or her own mental health and/or well-being? Is it subjective experience and self-knowledge alone? Is it an internalization of specific cultural assumptions and expectations about what constitutes a healthy or unhealthy, fulfilling or disruptive existence? Is it the internalization of psychological beliefs about human nature assumed to be a reliable gauge of human expression and development? If one could clearly identify the criteria a client relies on, what does that person then expect of therapy and the therapist? Is therapy assumed to "help" and what would "help" be experienced as? Does therapy significantly alter or change an individual's life? Does therapy facilitate and guide or does it dictate what a psychologically healthy and fulfilling life is?

All of these questions and underlying assumptions are in turn based on philosophical notions about human existence and development that lie at the foundation of every psychological theory whether implicitly or explicitly acknowledged. What, for example, constitutes psychological health, what does it mean to be free from anxiety, neurosis or psychic disorders? We assume psychological health and well-being means a "normal" process of living and development. But health and well-being are concepts influenced not only by cultural notions and definitions of what normal is and where "normalcy" falls on a continuum of mental health and disease, they also imply some notion of what life is like in the absence of psychological disorder. Are psychological

theories aware, if not overt, in their expressions of what life or human existence *should* be in the absence of disorder? Could therapy be engaged in something far beyond the scientific paradigms that psychological theory favors? Are we not stepping into the realm of meanings, beliefs, values and ethics? Are psychological theories, on some level, making statements not merely about our beliefs in human existence but also our hopes and desires about what we ought to do and should do? Do psychological and cultural constructions of “health” and “well-being” also point to ideas, if not ideals and hopes, of what it is to be a productive, responsible and fulfilled citizen within the wider social arena? If such assumptions reside at the foundation of therapy, is therapy engaged in facilitating (if not producing) a responsible citizenry?

All of these questions are impossibly large but as Hans Hofmann expressed at the beginning of the Harvard Project on Religion and Mental Health, they are always necessary to keep in front of us for they challenge and influence the scope and depth of our creative pursuits in these matters. Alfried Längle states that the purpose of psychotherapy should “help” an individual deal subjectively with “psychical and psychosocial problems and with suffering”.²⁵² Further, and perhaps more significantly, psychotherapeutic help is based on *human* skills. Seeing psychology from a more human perspective, Längle contends that psychotherapy is not magic and that it has its limitations. “Its results”, he states, “may be no better than what the patient’s own capacities, motivations and resources will allow”.²⁵³ This is a very interesting statement because it raises the issue, yet again, about the internal power of an individual to decide,

²⁵² Alfried Längle, “Goals and Motivations in Existential Psychotherapy: The Four Fundamental Conditions for a Fulfilled Existence”, 2. Can be found at http://www.laengle.info/al/al_pu_li.php?sprache=en.

²⁵³ Längle, “Goals and Motivations in Existential Psychotherapy: The Four Fundamental Conditions for a Fulfilled Existence”, 3.

at some level, for or against what confronts them from the outside or external world. Simply put, despite all the scientific generalizations, equations and theories about human nature, an individual can always take a different stand. Psychology should not promise a goal, Längle continues, its “horizon is smaller and more pragmatic; its aim is to help, or in cases of psychopathology, to cure”.²⁵⁴ Specifically, “psychotherapy is a craft [that] utilizes different tools that can help people deal more effectively with their problems and feelings...psychotherapy, therefore, may *open a way*”²⁵⁵ but it should refrain from dictating a specific direction or outcome for therapy. Erich Fromm provides an astute observation from the past in this regard:

What happens so often in psychoanalytic treatment is that there is a silent agreement between therapist and patient which consists in the assumption that psychoanalysis is a method by which one can attain happiness and maturity, and yet avoid the [patient’s own] leap...no amount of depth psychological insight can ever take the place of the act, of the commitment, of the leap. It can lead to it, prepare it, make it possible – and this is the legitimate function of psychoanalytic work. But it must not try to be a substitute for the responsible act of commitment, an act without which no real change occurs in a human being.²⁵⁶

One could say there is a commitment within existential analysis to encourage the client to take that individual “leap”. There is, in addition to this commitment, a particular attitude or “helping” posture on the part of those who practice existential analysis. The story provided in the introduction to this thesis attests to the open dialogue existential therapeutic approaches elicit amongst therapists themselves about what constitutes psychological “help” and the personal priority of values and meaning, we ourselves as therapists, ascribe in helping another human being.

²⁵⁴ Längle, “Goals and Motivations in Existential Psychotherapy”, 3.

²⁵⁵ Längle, “Goals and Motivations in Existential Psychotherapy”, 3.

²⁵⁶ Fromm, “The Limitations and Dangers of Psychology”, 35 – 36.

Let us now take a closer look at Längle's theory of existential analysis.

Existential Analysis

The historical roots of existential analysis lie within Viktor Frankl's theory of Logotherapy. The foundational philosophy of existential analysis and its therapeutic emphasis on meaning and value owe much to Frankl's work. Längle has, however, taken this foundation and expanded on it greatly thereby creating a far more extensive therapeutic approach.

Existential analysis is a useful theory in contemporary debates about the aim of therapy and the complexity of defining psychological "wellness". Existential analysis acknowledges the dialogue (as opposed to clinical interpretation) and engagement between therapist and client as open-ended and mutually transforming. Acknowledging therapy as a relational dialogue presumes mutual encounter, responsibility, reliance, faith, trust and respect on both sides. The therapeutic encounter, as dialogue, is a reflection or mirror of human expression: a combination of fact and possibility. The therapeutic encounter involves the client's story of factual situations and realities, then moves to a re-assessment, or an emotional re-experiencing, of the client's encounter with these same realities. This is followed by a re-evaluation of those feelings and experiences in light of the present dialogue within therapy, the client's experience in the present moment and, the possibilities that emerge within this encounter. Therapy therefore, from an existential psychotherapeutic perspective, is a spontaneous dialogue reflecting the experience of encounter between the client and therapist and the creative possibilities that emerge within this dialogue. These dialogues and the subjective experiences of both client and

therapist are further shaped by cultural and social contexts, beliefs, meanings and values. These contexts are embedded in the words, feelings and actions of the client. Because existential analysis focuses on an open dialogue, the client's own language is exposed and social, cultural, familial and religious contexts become transparent. Further, because a therapist within an existential framework approaches the client with an attitude of dialogue and openness, these contexts are respected and validated. The client has the ability to dialogue using their own language (and of course one has to concede that this language will be complicated with the internalizations of psychological culture) and this, it is hoped, will also facilitate the client's ability to take that responsible leap towards change within and from their own reference points. Focusing on what is possible, the therapeutic encounter enables the client to grasp what is potentially creative and positive.

This kind of therapeutic encounter, however, begins with a specific approach, attitude and stance towards human existence. Existential analysis is based on the interdependent or relational reality of human life. Individuality is not, as some would contend, non-existent. Individuality is real within relationship. Our individual responses, actions and decisions are seen within the multiple contexts in which we exist. Therapy focuses on how we encounter the world, how we integrate the world around us, how we contribute to the world, how we respond, accept or challenge the facts of our existence, how we construct meaning and finally, on how we live creatively. All of these are seen within the contexts of both the subjective experience of the client and the world in which they live. Psychological growth, health and development are contingent upon a client's participation, dialogue, engagement and response to the world. It requires the individual to think, feel, react and participate both subjectively and beyond their subjectivity by

transcending, reaching beyond creatively through faith, hope, possibility, decision and action. Once again, it is the “leap” Fromm alludes to, a leap towards the world that is precipitated by the client’s acceptance and affirmation of who they are.

Längle’s theory is a phenomenological approach and method of psychotherapy. Phenomenological, in this particular theoretical context, means that both therapist and patient come together with an attitude of openness, an attempt not to impose, manipulate or control. A concerted effort is made to suspend judgment, interpretation or theory in order to rely on “subjective intelligence, feeling and sensing”.²⁵⁷ This allows the phenomena or the experiences the individual has, to “speak”. Put another way, this approach literally allows our experiences to “speak for themselves”.²⁵⁸ Allowing our feelings, senses and perceptions to speak in the moment without the imposition of interpretation offers a chance to glimpse and possibly understand what Längle describes as “the unique essence of an individual”.²⁵⁹ After many years of clinical and private practice, Längle has stated that clients want to be understood and not interpreted.²⁶⁰ Clients want their stories and experiences to be heard and empathetically received.

To summarize thus far, existential analysis integrates and attempts to mobilize an individual’s subjective experience, freedom for decision, creativity, and action within and never divorced from the concurrent social contexts in which an individual is embedded. Understanding an individual’s essential core is only possible through relationship and the dialogical act: a coordination of both inner and outer reality. The coordination of inner

²⁵⁷ Alfried Längle, “Existential Fundamental Motivation”, 1. Paper presentation read at the 18th World Congress of Psychotherapy in Trondheim, Norway, August 16, 2002. Can be found at http://www.laengle.info/al/al_pu_li.php?sprache=en.

²⁵⁸ Längle, “Existential Fundamental Motivation”, 1.

²⁵⁹ Längle, “Existential Fundamental Motivation”, 1.

²⁶⁰ Personal notes taken during Längle’s comments on an existential analytic approach to therapy. Weekend seminar on Existential Analysis held at Trinity Western University in Langley, British Columbia in November 19 - 20, 2004.

and outer reality, of possibility or potential, is dependent upon dialogue and decision. I, for example, am never free from the responsibility of decision or the attitudes I may or may not choose to adopt. Greater psychological understanding and growth on my part requires both my awareness of the dialogue I am embedded in and my unique responsibility. I must personally utilize my human ability to decide, choose and act.

From an existential analytic perspective, human existence is viewed in the following ways: (a) Human existence is fundamentally dialogical. The individual and the world are inextricably linked and in constant dialogue; (b) Human existence is meaningful. A meaningful existence is shaped by freedom and responsibility (considered inherent human qualities in existential psychotherapies) yet individual freedom and responsibility are concurrently shaped by mutual dialogue between self and other, self and world; (c) Human beings have drives, aims, goals, tasks, values and purpose that they want to live out, indeed they wish to live out authentically. The aim of therapy is to help free an individual from fixations, distortions or trauma that influence their experiences or behavior and hinder their ability to engage fully in these purposeful tasks and goals; (d) Human existence is not static, it has movement and purpose. We have the ability to change things, we have the ability to experience what is of value and eliminate what is harmful; and finally, (e) The focus of existential analysis on subjective experience takes into account certain existential realities of human existence. For example, human beings suffer psychologically, physically and spiritually. Human life has both tragic and infinitely fulfilling elements. Human beings are capable of both creative and destructive ventures. Human beings are capable of self-reflective thought and this gives them the capacity to analyze their existence, place their actions, thoughts and feelings in context.

The capacity for self-reflection enables us to make decisions and choose a course of action within these realities.

The aim of existential analysis is to assist a person towards authentic and responsible decisions towards life and the world. Existence is defined as a fully lived “whole” life possible only in relationship by being engaged with the world. Existential analysis retains the three dimensional structure of the human psyche that we saw developed in Frankl’s Logotherapy. These dimensions are, once again, the spiritual, psychological and physical. The spiritual dimension corresponds with meanings, values, faith, justice, freedom and responsibility. Längle has added four pillars of existence or cornerstones of reality: a) **the world** which consists of facts, potentials and supporting structures; b) **life**, which corresponds to our particular network of feelings and relationships; c) **being oneself**, existing as a unique and autonomous person; d) **the future**, which we have the ability to shape and which incorporates meanings and values. It is Längle’s contention that we have a continuous dialogue with each of these cornerstones.

We now take a closer look at what Längle means by “dialogical” and the implications of dialogue for our progress as human beings.

Human Existence as Dialogical

As stated, human existence, from an existential psychotherapeutic perspective, is “dialogical”. By this, existential analysis refers to a fundamental characteristic of being human, namely, the active search and striving for dialogue, connection and relation with others. Dialogical refers to my constant confrontation with other people, with the world,

even with myself. This continuous confrontation and encounter demands something of me. As a human being, I have the ability to access my unique freedom to evaluate situations as I encounter them. I assess the reality of a situation before me. I have the capacity to contemplate the possibilities or potential that lie within a moment or encounter I face. I have the freedom to decide in this moment: what choice I will make, what stand I may take, or what kind of attitude I may adopt as I engage in the situation. This is, from an existential perspective, the continual challenge that confronts and distinguishes me as a human being. Längle states,

The possibilities within this world point to our human potential: we shape our existence through these possibilities. "Existence" means having a chance to change things for the better, to experience what is of value and to avoid or eliminate what could be damaging or harmful. Possibilities provide us with directions to which we can orient ourselves. This is an essential orientation of human beings, not a superficial one. Being directed towards what is possible, what is yet to be fulfilled, what is waiting for us each in each and every situation corresponds perfectly to the essence of our spirit – a spirit that is looking out for participation, dialogue, creativity and possibility. We see the essential task of existence to be one of finding this correspondence between our potential for participation (for creativity, action and encounter) and what is possible, what is needed, what is undone, what we see and feel and understand to be waiting for us, despite the possibility of risk and error.²⁶¹

Psychological health follows on such an approach. If my response to these encounters and confrontations is to be considered authentic, and therefore psychologically healthy, there must be a coordination of both inner and outer reality. My response must have my inner consent, a subjective affirmation at the experiential level that this is the right response. In addition, my response must also include a realistic assessment of the external world or outer reality.

One can also initiate an ethical dialogue within this idea of encounter and confrontation. Every encounter challenges me in terms of my response. I may weigh

²⁶¹ Längle, "The Search for Meaning in Life and the Existential Fundamental Motivations", 29.

what my response will be, evaluate my response and actions in terms of a personal moral stand or culturally shared ethics. I weigh what is possible or potential with what might be needed, demanded or appropriate in a particular moment or situation. I weigh this against a backdrop of shifting realities and I do this despite the fact that every decision I make is simultaneously cast in possible risk, doubt or error. This is the existential paradox that further characterizes me as fundamentally human. Yet, existential analysis' approach to psychotherapy is a decidedly optimistic approach of possibility in the face of reality.

Existential analysis meets clients at the profoundly human level. Therapy necessarily places its initial focus on the individual as they present themselves sitting before the therapist but the therapeutic approach, based on dialogue between client and therapist, presumes encounter and negates the critique that the therapist is neutral or an objective by-stander. On the contrary, the therapist encounters another human being within this dialogue and this opens the door to analyzing the ethical stand occurring between therapist and client, a stand that reflects the ethical posture embedded in all human encounter. The therapist confronts the client's experiences, feelings and thoughts. Each of the client's highly individualized statements is a simultaneous expression of familial, social, ethical and religious meanings, values and aspirations. Dialogue within therapy reveals the complex relationship between inner and outer reality. The therapist encounters all of this within the dialogue they have with the client. The therapist, too, is subsequently challenged, moved and changed by this encounter.

Let us now take a closer look at the four fundamental motivations.

The Four Fundamental Existential Motivations

The theory of existential analysis is structured around what are called the four fundamental existential motivations. My motivations as an individual are activated by the continuous engagement and dialogue I have with the world around me. I am essentially called, confronted and provoked by life. I, in turn, must respond to this calling and be active with my whole being. Human existence, from an existential analytic perspective, is fueled by these four basic and fundamental motivations. They make up the structure of existence within the theoretical model of existential analysis. Each of the four motivations, in turn, corresponds to (or dialogues with) a respective existential reality or pillar. The first fundamental motivation corresponds to the world, the second to life, the third to self and the fourth to the future. Each motivation involves an encounter and confrontation with a fundamental question of existence. Because we are essentially “dialogical”, our being confronted or questioned by the world, by life, by other human beings demands our active response and participation. In turn, the concrete expressions that mark our unique responses and how we choose to participate in the world stem from our individual perceptions and experiences of these fundamental questions.

The **first fundamental existential motivation** corresponds to my very existence. “I exist”. “I am here”. “I am in this world”. As Längle states, the very fact that I, as a human being, am conscious of this fundamental question of existence places an existential question before me, “Can I be”? “How do I exist”? The monumental scope of such questions is tempered by our personal experiences of the following: do I experience *protection, space and support*? Do I feel protected and accepted? Do I feel at home

somewhere? Where do I find support in my life? The highly subjective experiences we have that our very existence is protected and supported, that our existence is reliably “held”, leads to further experiences of trust and faith in the world and confidence in ourselves. We can see that these experiences encompass a vast range from parental and familial, societal or institutional, to experiences of divine support and protection. Whether or not support and protection is in fact experienced depends on the kind of support and protection a family, culture or society either deems appropriate or is capable of providing. However, lacking an experiential base of protection and support, Längle states, we may experience insecurity, fear and restlessness.

Dialogue with the world incorporates both my experience and my subsequent participation and action in the world. In this first category, my active participation and dialogue with the world necessitates my acceptance and endurance of the conditions of life and not an attempt to flee from them. It requires that I realistically acknowledge and accept the realities and facts in which I am embedded. Längle states,

To accept means to be ready to occupy the space that I am in, to rely on the support given and to trust the protection bestowed on me; in short “to be here” and not to flee. To endure requires the fortitude to accept whatever may be difficult, menacing or unalterable and to tolerate what cannot be changed. Life imposes certain conditions on me; the world has its laws to which I must adapt. This idea is expressed in the word “subject” in the sense of “not independent”, of being subject to. On the other hand these same conditions of the world are reliable, solid and steady despite the boundaries they impose. I can allow them to be and accept them if I can be at the same time. To accept means letting the other be, whether a person, a thing or a situation. It means that I can be and the other can be equally because there is still enough space for me and the circumstances do not threaten my being here.²⁶²

²⁶² Längle, “The Search for Meaning in Life and the Existential Fundamental Motivations”, 32.

The **second fundamental existential motivation** extends from the first. Once we have our space in the world, we fill it with life. We want our existence to have value since it is more than mere fact. This places a fundamental existential question of life before me. “I am alive”. “Do I like this”? “Is it good to be here”? “Do I truly live”? The answers to these questions are experienced and embodied within our dialogue with the world, specifically through *relationship, time and closeness* with others. Our experiences of relationship and closeness, for example, lead to a harmonious feeling within ourselves and that in turn, extends outward towards the world generally. If I am valued and experience this from others, I value myself and in turn value others. If I experience what I do in life is recognized by others, validated and affirmed, I have a sense of my place in the world and that my existence is of value. Simultaneously, that experience of outer recognition and value is experienced internally as self-value and projects outward again as I in turn value others I encounter. Within the fundamental existential motivations we see a continuous balance between individual experience and the reality of interdependence with the world around us.

A life lacking in experiences of relationship, time and closeness can lead to feelings of longing, depression and a deliberate distancing of ourselves from others. As with the first fundamental motivation, my obligation as an individual capable of decision is to access my freedom and responsibility and be actively engaged in my development. Therefore, my active participation is to engage in life and allow myself to be both close to others and touched by others. Längle states,

I must seize life by engaging with life. When I turn to other people...I turn towards life. When I move towards something or someone, allow myself to get close, allow myself to be touched, I experience life as vibrant.²⁶³

²⁶³ “The Search for Meaning in Life and the Fundamental Existential Motivation”, 33.

The **third fundamental existential motivation** corresponds to my experiences and feelings of singularity and uniqueness in the midst of, and never divorced from, my being related to the people and the world around me. These experiences and awareness place the following existential questions of being before me. “I am myself, do I feel free to be myself?” “Do I have the right to be who I am and behave as I do?” The ethical demand on me raises still further questions: “Who am I”? “Who am I capable of becoming”? “Who should I become”? Answering these questions once again requires dialogue with the world in simultaneous conjunction with our subjective experiences of: *attention, justice and appreciation*. Experiencing these leads to self-esteem, self-respect and living authentically. Without these, we may experience solitude and shame.

Again, my active participation or responsibility is to say “yes” to myself, to affirm my being. My encounter and dialogue with others in addition to my care and appreciation of others creates an equal appreciation of myself. Allowing myself to encounter another person in their uniqueness, being capable of delineating my own uniqueness and accessing my ability to stand on my own, lends itself to the experience of personal affirmation, the “yes”. This particular motivation is useful in discussing issues of ethics and identity, self and other, individuality and community.

The question “Who am I” relates to the discovery of self within dialogue – the discovery of self in the midst of this world. The questions “who am I capable of becoming” and “who should I become” are those of an individual who is firmly embedded in the circumstances, connections, conditions, contexts and “facts” of their lives. Answers to these questions necessitate not only an awareness of subjective feeling

and experience, they benefit in depth and substance from dialogue with the concrete social and cultural structures and institutions as well as the more ambiguous arena of culturally shaped and perpetuated ethics, meanings and values.

These dialogues raise creative, ethical and illuminating questions about the extent to which internal psychological development and fulfillment are inextricably linked to the external world. They have the potential to reveal the extent to which my development and psychological well-being is linked to culturally sanctioned ideologies of how we should and ought to behave and what the normal parameters of human behavior and conduct are. My active participation at this level requires my reflection and response: what am I confronted with or questioned by and how do I respond? My participation requires my acknowledgment that I am a unique individual, discernible yet shaped by larger cultural contexts and values, be they familial, cultural, religious, economic or political.

The **fourth fundamental existential motivation** corresponds to the meaning and purpose of my existence. It is not enough to merely “find ourselves” or value self-actualization as our primary goal (as popular psychological parlance often states). Viktor Frankl frequently commented that our western cultural pre-occupation with self-actualization should not in fact be a goal in and of itself. We do not live merely for ourselves. We live for something or someone. Although we are aware of and experience our singularity and uniqueness, we also orient our existence beyond ourselves towards others. Our development as human beings is not static, it has movement and direction and is oriented outward with aim and purpose. Although many psychological theories highlight self-discovery and self-actualization as the aim and goal of successful therapy,

both Frankl and particularly Längle, see our human development and fulfillment in terms of relational possibility, meaning and value. As such, to experience our lives as fulfilling and meaningful requires us to transcend our individuality. This means reaching outward in dialogue and being engaged and active in the world around us. At this level, we are confronted with a fundamental question about the meaning of our existence. “I am here – for what purpose”? The factual reality of my existence is placed in immediate context and possible answers to this question come through my experiences within *a field of activity, a structural context and a value to be realized in the future*. This puts me once again in dialogue with contexts, activities, shared values and meanings that simultaneously evoke my individual responsibility, my freedom, my creative possibilities and my decisions. Similar to Frankl’s idea of the actualization of creative, experiential and attitudinal values, Längle contends that we need specific activities to be engaged in and we need to contribute to the world. We need structure in our lives and contexts in which we experience the value of contribution and connection. As we saw in William Doherty’s illustration about the experiences of psychological reductionism many of his clients had endured when they expressed their desires to be socially and ethically engaged, existential analysis acknowledges the enormous value to our development as human beings when we, as individuals, are actively engaged in the developments and potential changes to the world around us.

Since existence, from an existential perspective, is seen as a process of becoming that points towards the future, the fulfillment and meaning we experience through the goals we place in front of us and the things we strive for, evoke further feelings of hope, trust and faith in the future. These experiences make us capable of dedication and action.

Our committed response to the world provides meaning and a profound sense of fulfillment. Without these experiences, feelings of emptiness, frustration, despair and addiction often arise.

With each motivation, we have an individual responsibility, literally doing our part in actualizing meaning and fulfillment in our lives. This is done through our active participation in the world and requires a phenomenological attitude. Frankl often stated that life asks us questions to which we had an ethical responsibility to respond to and provide answers for. The dialogical nature of existential analysis follows a very similar line of thought. Every situation in life places a demand or question before me. How I respond represents the existential access to meaning in life. Do I, for example, respond with an attitude of openness toward others and the world? What can I do, what am I capable of in this situation? What should I do in this moment? Is what I am doing a good thing (what kind of choice have I made), is it right for others, for me, for the future, for the environment? This fourth motivation corresponds to issues of personal responsibility and possibility. If one were to analyze each of these questions, we would find that an attitude of openness requires a level of trust and faith. In other words, if human existence is dialogical and I have experienced protection, support, relationships and appreciation and actively responded by participating in the world, I am more likely to have an attitude of trust and openness towards the world. This motivates me to invest once again the dialogical process and exercise my moral imperative: to become, as Tillich would have it, a person within a community of persons.

Conclusion

The fundamental existential questions we have explored briefly in Längle's theory of existential analysis are not singularly psychological questions. They are open-ended, resound with multiple meanings and ethical interpretations of what human existence is and what we wish to strive for and accomplish as human beings. These questions, reflected in therapy by clients who are attempting to understand and fully grasp the meaning and value of their existence, point to how open psychological health and well-being are to interpretation. Längle's statement in the title of this final chapter assumes the fluidity of concepts such as "world" and "I". From an existential perspective, the discovery of who I am is an ongoing process open to change. A concept of self, from this perspective, does not assume it is either fixed or stable. What constitutes self is sometimes identifiable, sometimes elusive. A unique and distinguishable I is simultaneously dependent on and draws meaning from the world.

We saw illustrations in the previous chapter of the contemporary critique that an emphasis on self-actualization and self-fulfillment, so prevalent in our "therapeutic" age, gives way to a general belief that there is a "stable innate self" that has the right to prioritize self-expression over and above the rights of community. Existential analysis, as we have seen, would not presume a separate and identifiable self. Rather, the self is discovered continuously within relationship. Therefore, fundamental existential questions such as "who am I"? engage psychotherapy in a deeper dialogue of personal and collective values, ethics and beliefs. The meaning of my unique existence rests within the dialogues I have with the wider culture of which I am part and this, existential analysis suggests, raises the possibility of analyzing and contributing to the ethical and

moral connections between individual and cultural development. The dialogue between the individual and the social/cultural raises the issue of an individual's moral and ethical response as a human being. It harkens back to the historical voices we have explored and, in this chapter, to Jaspers comment about the potential that resides in each individual spark. Valuing the individual and community as interrelated places more trust and faith in individuals and the ethical power they may exercise towards the world.

Existential analysis, like any psychological theory, has, as Frankl pointed out but as few theories actually acknowledge, a philosophy of human nature at its core. Existential analysis assumes human nature is a "multidimensional unity", to borrow a phrase from Paul Tillich. Therapy must reflect this multidimensionality as the dialogues that take place within therapy are both personal and collective expressions of possibility against shifting backdrops of reality. These dialogues expose what it is to be human, what it is to experience and express faith, what is both constructed and experienced as meaningful. These dialogues express ethical statements, cultural norms and expectations. Therapeutic dialogues within existential analysis expose a client's experiences of relationship, support, community, isolation and despair. The experiences a client has of their relationship to and with the outside world extends to highly personal experiences they have of themselves. Existential analysis encourages the expression of these experiences through dialogue in therapy and by doing so, keeps fundamental questions about our existence alive.

CHAPTER SEVEN

CONCLUDING REMARKS

[Man] is not a thing; [he] cannot be dissected without being destroyed, [he] cannot be manipulated without being harmed, and [he] cannot be reproduced artificially. While life in its biological aspects is a miracle and a secret, [man] in his human aspects is even more an unfathomable secret to [himself] and to [his] fellow [men]. We know our fellow [man] and ourselves, and yet we do not know [him] or ourselves, because we are not things and our fellow [man] is not a thing. The further we reach into the depth of our being, or someone else's being, the more the goal of full knowledge eludes us. Yet we cannot help desiring to penetrate into the secret of [man's] soul, into the innermost nucleus that is [he]...there is, however, another path to knowing [man's] secret; this path is not that of thought, but that of *love*.²⁶⁴

It is not always easy to distinguish the element of faith from the element of scientific hypothesis in a psychological assertion²⁶⁵.

We conclude this thesis with two quotations from two long time friends, friends who were sometimes intellectual adversaries, other times partners in dialogue: Erich Fromm and Paul Tillich. Erich Fromm's quotation reminds us that psychology's scientific presumption that it can capture and "know" who we are really is in fact, an illusion. For every question that we pose, and answer we believe we have discovered, we are faced with yet another question and challenge. The historical illustrations we looked at in this thesis were substantial dialogues between theology and psychology that ultimately remind us of many enduring themes: the ambiguous and mysterious character

²⁶⁴ Erich Fromm, "The Limitations and Dangers of Psychology", 33.

²⁶⁵ Paul Tillich, *Dynamics of Faith*, (New York: Harper & Row, 1957): 84-85.

of human life and whether we can accept this ambiguity and work with it theoretically. Can we be satisfied with creative questioning and dialogue?

In the second quotation, theologian Paul Tillich offers us this provocative line from his 1957 publication, *Dynamics of Faith*. Tillich suggests that psychological theory is as much influenced by our hopes and beliefs about human nature and by how we creatively imagine the possibilities of human development and behavior as it is by scientific interpretations about what it is to be human. Fromm and Tillich were, as we saw, prominent members of The New York Psychology Group from 1941 – 1945. Tillich the theologian, and Fromm, the psychologist, represented the unique and profound dialogue that took place in the mid-twentieth century about individual development and by extension, cultural development. As part of a particular historical, social and religious context, The New York Psychology Group, Viktor Frankl and the Harvard Project on Religion and Mental Health bridged many gaps between two powerful cultural discourses, psychology and theology, through their commitment to positive, ethically grounded human potential. These groups and individuals made substantial contributions to some of the following issues: the aim and purpose of psychology within western culture, the moral and ethical foundations of psychological theory, the conceptualizations of humankind implicit in every psychological theory, including, the implications these same concepts had when they were (and are) applied to general and universal assumptions about individual and cultural development and fulfillment.

As we saw, psychology was not singled out. Theology, too, came under scrutiny. The perception that traditional theology was increasingly irrelevant to the twentieth century fueled a renewed desire to discuss and analyze both religion's place within

western culture and the role of the minister towards his parishioners. Joining together in dialogue, certain individuals from these two powerful domains believed that despite the respective boundaries of their fields, they had one important thing in common: maintaining the value and dignity of human life.

The dialogues between psychology and theology explored in this thesis also offer a rich perspective and context from which to assess many contemporary voices in the field of psychology. As we saw in the two final chapters of the thesis, critical psychology and existential analysis, although offering very different approaches and perspectives to psychological study and the therapeutic encounter, have much to gain from connections with the past. In the case of existential analysis, it has direct roots in a theory and therapy from the past: Viktor Frankl's Logotherapy. And yet, it is also an example of a contemporary psychotherapy that embodies the rich ethical, compassionate and humane tone – including dialogue itself - of the dialogues of the past between theologians and psychologists. And as for critical psychology, there is an ironic contrast between its serious and pointed critique of psychology and its own lack of awareness of historical, religious and ethical context. An examination of the dialogues from the past may contribute to our reflection on similar questions, based on similar aspirations, that we continue to ask. Always in the background of these enduring questions is the possibility of change, the possibility of discovering greater depths of human potential.

The view that human existence is essentially relational is not new, not discovered by post-modern theory but in fact well grounded in history. Through the topics that it studied, this thesis attempted to expose the relationship, as opposed to the contrast, between individual and cultural expressions of freedom, responsibility, care and justice.

Individually and collectively, we have a choice, indeed an obligation, as human beings to progress psychologically and spiritually in ways that are positive and constructive for humankind as a whole. “What seldom occurs to us”, Hans Hofmann once wrote, “is that the fault may not lie in either the people or the world but in their relation to each other”.²⁶⁶

Is it possible to maintain a relationship between the dignity of the individual and our collective participation in the public good? Is this within the realm and scope of psychology? If not, should psychology expand its “mandate” to include dialogues that address this relationship? Issac Prilleltensky has suggested that psychology must find a balance between the individual and the collective. Finding this balance is a difficult but necessary task and requires psychology to open itself to collaborations it has historically been uneasy with, including those with religion, philosophy and ethics. The motivation to continue the dialogue and the questioning comes in part from the essence of the dialogues of the past, a belief in the human potential for change.

We conclude with a comment from 1963 by Dr. Edward Auer at the end of a symposium on moral values in psychotherapy. He stated,

We may have come closer to that goal in which we and our students as individuals try to develop constructive social capacities, to develop ourselves as citizens and devote our energies, intelligence, and skill not only to work and labor and the enjoyment of our fruits, but also to constructive and satisfying social relationships in the family, the community, in the nation, and in the world”.²⁶⁷

²⁶⁶ Hans Hofmann, *Discovering Freedom* (Boston: Beacon Press, 1969), 13.

²⁶⁷ Dr. Edward Auer, from the 1963 symposium of the Academy of Religion and Mental Health entitled, “Moral values and Psychoanalytic Education and Practice”, 19.

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