

Existential Therapy

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Scope of this current paper is to deliver a concise critical reflection a contemporary therapeutic practice located in the framework of existential analysis, termed existential psychotherapy. The equally titled book by Irvin D. Yalom will serve here as the backbone of the investigation¹. Retracing of the unique key concepts, which distinguish the existential practice from other therapeutic schools, the location of existential analysis in space and time of the therapeutic enterprise, but also the articulation of first crude critical questions that arise from a first reading of the topic shall be the “throw-ins” to this paper.

Throw ins? Yes: The use of language and of the philosophic discourse, outline and foregrounding of the existential condition, the five existential concerns, the positioning between two cognitive orthodoxies, and gratitude: analysis of a dedication, are the ingredients of this survey.

What Yalom in his book is offering is “a paradigm”, as opposed to “the paradigm”. By positioning his theory as an addendum, a possibility, he is already puts into practice one of the central ambitions of the existential method, being the embracement of otherness, of the elusive dimension and irreducible quality of mental life. There can be no final and definitive model of therapeutic knowledge, because if there is, it fails to mirror ever evolving and unfolding nature of existence as such. There may be precedence, there may be universally shared factors, but yet there also has to remain place for doubt and error.

“Existence is inexorably free and, thus, uncertain.” and “Cultural institutions and psychological constructs often obscure this state of affairs, but confrontation with one’s own existential situation reminds one that paradigms are self-created, wafer-thin barriers against the pain of uncertainty.”

In this statement lies already the fundamental critique of the two main columns of therapeutic theory, both of which are essentially situated in the modernist way of thought, concerned with the enunciation of certainties and fundamental truths and have come to dominate the field of 20th century psychotherapy. Psychoanalytic edifice on the one hand and the positivistic scientific approach of behaviourism on the other, come to being as two hermetic and thus autistic bodies of knowledge, each containing a constructed view on the mind, which leaves the space between the two devoid of possible communication and interaction. Its either or. Until the advent of the humanistic mode of therapeutic thought, there was no middle ground. There seemed to be a void, which in the course of the emergence of counter cultures, in the wake of the second world war, a void, where the profound experiences: annihilation, liberation, and such needed to find a receptacle, was gradually populated. Freudian analysis is acknowledged to have brought the possibility of the mind as a loose organisation of instinctual forces, most of which are active in the realm of the unconscious. Yet here Yalom confronts the reader with the possibility, that the subsequent emphasis of a temporal hierarchy, following the archeological model of Freud, might be an arbitrary construction, a faulty edifice erected in the

¹ Yalom, I. D. (1980). *Existential Psychotherapy*. New York: Perseus Books Group.

triumph of a more than promising foundation. As to the shortcomings and hermetic reasoning of the positivistic and behaviouristic block, Yalom with ease introduces the reader to the beauty of contradiction, redundancy and irreducibility of the mental apparatus. So “What is the alternative?” He highlights the incompatibility of the qualitative and the quantitative in the mapping of the human mind with a rather striking axiom:

“Again and again one encounters a basic fact of life in psychotherapy research: the precision of the result is directly proportional to the triviality of the variables studied.”

Following an enlightened and yet postmodern mode of thought, he proposes a method based on the taking into consideration of the phenomena proper. One does not have to go far, since what he is calling for is to work with earnest introspection. Empathy comes to being in looking into oneself and into the world at the same time in the discovery of what could be called the tragic challenges placed by life itself onto each and everyone of us. How does one do that? And this is where he introduces us in the proper use of philosophy and literature as a quelling source of potentially universal experiences. “Certain truths of existence are so clear and sure that logical argument or empirical research corroboration seems highly gratuitous.” Thus we have to go beyond the evident in the same way that we have to go beyond our own perceptual confines. It is not only out of therapeutic duty, but also as a true human passion, “to encounter the other without ‘standardised’ instruments and presuppositions.” Here his ambition comes close to Carl Rogers’ call for the engagement with the other on the level of I-Thou encounters, focusing on the here and now. Empathy comes into being as non-judgmental acceptance, as an “attitude of disciplined naivety”, a term which is borrowed from Rollo May. This as professional cognitive acrobatics reminds of the “evenly distributed and suspended attention” called for in psychoanalysis. And in fact the structure of his work does contain borrowings from the analytic discourse. Where Freud and his disciples have capitalised on the causal chain of *drive* -> *anxiety* -> *defence mechanisms*, in existential therapy, the matrix of drives is substituted the matrix of existential concerns, leading to the an updated hierarchy of mental functioning: *existential concern* -> *anxiety* -> *defence mechanisms*. The core of research in existential therapy is first the location and fixation of the primary drivers, the existential concerns proper, and the subsequent organisation of phenomena, pathologies and intervention strategies around these primary concerns.

“(M)y professional training has compelled me to consider the extant research for each of the four basic existential concerns - death, freedom, isolation and meaninglessness.”

Whereas for Freud, the source of psychopathology was the overwhelming nature of sexuality on the infantile mind, so sex, the postulation of these new grandiose themes at first appear as a collection of pathetic drum beats. Is this it? Have I not been reading enough novels, seen enough movies, poems and such to have become immunised against the underlying melodrama? On the contrary, is the argument put forth by Yalom. He lines up the great literary tradition: Dostoevsky, Tolstoy, Kafka, Sartre, Camus, as containers of profound experience, which not only can not be discarded, but also are valid and precious repositories, where the otherwise elusive and ineffable qualities of the human condition are elaborated. Thus what he does is to propose both, literature and philosophy to be as much or maybe even of more value to therapeutic research

and practice as scientific research methods would be. “Great literature survives, as Freud pointed out in his discussion of Oedipus Rex, because something in the reader leaps out to embrace truth. The truth of fictional characters moves us because it is our own truth.” And:

“If Queen Elizabeth or Frederick the Great or Ernest Hemingway were to read their biographies, they would exclaim, ‘Ah - my secret is still safe!’ But if Natasha Rostov were to read War and Peace she would cry out, as she covered her face with her hands, ‘How did he know? How did he know?’”²

That this sort of knowledge, which is a knowledge about the mysteries of life, about moments of revelation, in its essence and form, makes the building up of interfaces with the empirical modes of scientific production, rather difficult, the danger of segregation and marginalisation in the context of health economy becomes apparent. Existential therapy thus next to articulating a critique of scientific evaluation, still is resting on a body of knowledge, which has grown out of the existential school of thought. Yalom connects us to the epiphany of Kierkegaard, and in this episode also the defiant opposition of existential therapy towards the ambient mainstream is already keyed in: Thinking about his many successful friends, “benefactors of the age who know how to benefit mankind by making life easier and easier”, he suddenly realised his own destiny:

“You must do something but inasmuch as with your limited capacities it will be possible to make anything easier than it has become, you must, with the same humanitarian enthusiasm as the others, undertake to make something harder.”³

Existential therapy takes up exactly those interstitial spaces, which have been left ignored by other therapeutic schools, yet interestingly enough, by taking on the phenomenology of existence, that is to say, instead of beginning with isolated building blocks of mental functioning, as for example it is the practice in behaviourism, taking conceptual categories such as freedom, choice, isolation and absurdity as points of departure, the discoveries made in the process appear to be substantial. But more than a discovery *ab ovo*, we are dealing with a reconnection to a tradition, which is as old as humanity itself. Yalom points us to the distinction between an existential tradition in philosophy in general, as opposed to the formal, self declared, existential school of philosophy. The former is “obviously ageless” as “What great thinker has not at some point in both work and life turned his or her attention to life and death issues?” Implicit in this shared concern is the rethinking of the dichotomy the normal or healthy and the pathological. Here again lessons learned from analysis is refined. If evidence of struggle and pain is found in cultural artefacts, or even crisper, these artefacts draw their value and intensity from the elaboration of exactly these struggles and the subsequent pain and suffering, then this would imply that no single individual can be free of the tension or burden in the wake of the existential concerns. So what then distinguishes the normal citizen, who lives his life in more or less stable circumstances from those who have discernibly fallen ill? The answer to this is given in a parallel to physical diseases: Infectious diseases can be understood to be pervasive, the microbes

² Wilder, T. (1978), *One More July*, In Reader’s Digest, January 1978, (p.133)., New York: Trusted Media Brands Inc.

³ Kierkegaard, S. (1946). How Johannes Climacus became an Author. In Bretall, R., Ed. *A Kierkegaard Anthology*. (p.193). Princeton, N.J.: Princeton University Press.

are always present, yet in normal circumstances the immune system would be actively resisting these environmental stressors. It is in the case, where the immune system breaks down that suddenly it appears that one is befallen. As the concept of defence mechanisms is carried over in existential analysis, the model of a dynamic equilibrium of tension, coming from the echoes of existential concerns in one's environment on one side and the corresponding mental defence apparatus, the main role of which is the detoxication of anxiety, on the other, is drawn up. So how is therapeutic work to be conducted in this context? We have already been earlier hinted to the use of the vast Borgesian archive of stories, encounters, precedents so to say, an infinite permutation of archetypes. Thus Yalom's book contains ever more anecdotes. The man who is looking for his keys not where he lost it, but where the light of the lantern illuminates the ground, the cat that weighs ten pounds after having eaten ten pounds of butter, leaving us with the question: we have the butter, but where is the cat? Existential analysis builds on metaphors, and thus in a similar way is rooted in neurotic disorders, just as psychoanalysis began to extend out of that pathology. Neurosis by definition contains the withdrawal from parts of reality. Reality as a whole extends beyond the awareness of the individual, thus even the healthiest person will have to deal with uncertainties. Yalom begins his introduction with the question towards what is that which constitutes good therapy. It is common knowledge, that the effectivity of therapists becomes increasingly comparable across modalities as they mature in experience. There is a certain *je-ne-sais-quoi*, components which resist condensation into theory. He explains the story of a cooking class he took in Armenia, where even the most diligent observation and reproduction of what the teacher, mind the language barrier, was showing, failed, until he realised that the cook's servant was throwing in handfuls of spices in the oven after the cook was done. The throw-ins. Here is a strong faith in the irreducible and ineffable: "I believe deeply that, when no one is looking, the therapist throws in the 'real thing'." For every reason.

Finally. 'For every reason': How could one decipher the wording of the dedication, to his spouse, Marilyn Yalom? It is general, a synthesis of the generous, the banal and the universal. No thing too small shall be excluded, no fear of pathos, no insistence in being overly creative, no thing too big should be further inflated by too much attention. The poetry of the rainbow lies in the symbolic of the all inclusive collection, all the colours, even those you have not thought about, even those I have forgotten, all those that are borrowed, were never mine, for every reason can escape reasoning, just as every season can escape seasoning.