## Course-EC-2 Paper 2 (Psychotherapy) Unit 3; Sem IV By Prof. (Dr.) Iftekhar Hossain, Head of Department, P.G Department of Psychology Patna University Contact No-993408701

## **EXISTENTIAL PSYCHOTHERAPY**

**Existential psychotherapy** is an approach to therapy originally developed by Rollo May, Victor Frankl, and Irvin Yalom. It centres on the premise that each person is essentially alone in the world and that realization of this fact can overwhelm us with anxiety. This anxiety may take a number of forms and is the root of all psychopathology. In addition to the inescapable conclusion of aloneness, existential theory holds that other inevitabilities of human life, especially death, contribute to a powerful sense of meaninglessness in many people. Existential therapists place great emphasis on clients' abilities to overcome meaninglessness by creating their own meaning through the decisions they make. They especially encourage clients to make choices that are true to themselves in the present and future, rather than choices that are determined by restrictive relationships they have had in the past. They empathize with the clients' reactions to the unavoidable facts of existence, but through questioning and discussion, they aid clients in assuming control and assigning significance to their lives

Existential psychology rejects the mechanistic views of the Freudians and instead sees people as engaged in a search for meaning. At a time when so many people are troubled by the massive problems of a technological society and seek to repair their alienated modes of living, existentialism has gained great popularity. It seems to promise the restoration of meaning to life, an increased spiritual awakening, and individual growth that will bring freedom from the conventional shackles created by a conformist society. Hardly a unified movement that speaks with a single voice, the existential view actually turns out to be many views. Its roots lie deep in the philosophies of Kierkegaard, Heidegger, Tillich, Sartre, Jaspers, and others. When we discuss the psychological applications of existentialism, names such as Binswanger, Boss, Gendlin, Frankl, May, and Laing come to mind. Philosophically, existentialism springs from the same sources as does phenomenology. The existentialists make a number of assertions about human nature. Basic to all is a fundamental human characteristic: the search for meaning. That search is carried out through imagination, symbolization, and judgment. All of this occurs in a matrix of participation in society. From the standpoint of both their physical environment and their biological environment, people function in a social context.

A crucial facet of personality is decision making, which involves the world of both facts and possibilities. Thus, personality is not just what one is—a biological, social, and psychological being— but also what one might become. Many existentialists believe that decision making involves a set of inevitable choices. One can choose the present (the status quo), which represents lack of change and a commitment to the past. That choice will lead to guilt and remorse over missed opportunities. But one can also choose alliance with the future. That choice propels the person into the future with an anxiety that stems from one's inability to predict and control the unknown. Such experiences of guilt and anxiety are not learned but are part of the essence of living. It requires courage to choose the future and suffer the inevitable anxieties that this choice entails. A person can find that courage by having faith in self and by recognizing that choosing the past will inevitably lead to a guilt that is even more terrifying than anxiety.

The Goals of Therapy. The ultimate goal of existential psychotherapy is to help the individual reach a point at which awareness and decision making can be exercised responsibly. The exercise of cognitive abilities will allow for the achievement of higher states of love, intimacy, and constructive social behaviour. Through therapy, one must learn to accept responsibility for one's own decisions and to tolerate the anxiety that accumulates as one move toward change. This involves self-trust and also a capacity to accept those things in life that are unchangeable or inevitable.

## **Techniques.**

Existential therapy does not emphasize techniques. Too often, techniques imply that the client is an object to which those techniques are applied. Instead, the emphasis is on understanding and on experiencing the client as a unique essence. By experiencing self, the client can learn to attach meaning and value to life. Sometimes the therapist will confront the client with questions— questions that force the client to examine the reasons for failure to search for meaning in life. For example, a client who repeatedly complains that his job is not very fulfilling may be asked why he does not search for other employment or return to school for more training. Such questions may force the client to examine his or her orientation toward the past more closely, and this in turn creates feelings of guilt and a sense of emptiness.

## Logo therapy

One of the most widely known forms of existential therapy is *logo therapy*. This technique encourages the client to find meaning in what appears to be a callous, uncaring, and meaningless world.

Viktor Frankl developed the technique. His early ideas were shaped by the Freudian influence. However, he moved on to an existential framework as he tried to find ways of dealing with experiences in Nazi concentration camps. He lost his mother, father, brother, and wife to the Nazi Holocaust and was himself driven to the brink of death. It seemed to him that the persons who could not survive these camps were those who possessed only the conventional meanings of life to sustain them. But such conventional meanings could not come to grips with the realities of the Nazi atrocities. Therefore, what was required was a personal meaning for existence. From his wartime experiences and the existential insights that he felt permitted him to survive, Frankl developed logo therapy (the therapy of meaning). Many of his ideas are expressed in a series of books. Frankl's views about personality and his ideas about the goals of therapy are generally quite consonant with our previous discussion of existentialism. However, it is not always clear that logo therapy techniques bear any close or rational relationship to the theory.

Logo therapy is designed to complement more traditional psychotherapy, not to replace it. However, when the essence of a particular emotional problem seems to involve agonizing over the meaning or the futility of life, Frankl regards logo therapy as the specific therapy of choice. Logo therapy then strives to inculcate a sense of the client's own responsibility and obligations to life (once the latter's meaning has been unfolded). Frankl makes much of responsibility, regarding it as more important than historical events in the client's life. What is crucial is the meaning of the present and the outlook for the future.

In particular, two techniques described by Frankl (1960) have gained considerable exposure.

**Paradoxical intention** is a popular technique in which the client is told to consciously attempt to perform the very behaviour or response that is the object of anxiety and concern. Fear is thus replaced by a paradoxical wish. For example, suppose a client complains that she is fearful of blushing when she speaks before a group. She would be instructed to try to blush on such occasions. According to Frankl, the paradoxical fact is that she will usually be unable to blush when she tries to do what she fears she will do. Typically, the therapist tries to handle all of this in a light tone. For example, in the case of a client fearful of trembling before his instructor, Frankl (1965) instructs the client to say to himself: "Oh, here is the instructor! Now IL shows him how nicely I can tremble.

The second technique,

**De-reflection**, instructs the client to ignore a troublesome behaviour or symptom. Many clients are exquisitely attuned to their own responses and bodily reactions. De-reflection attempts to divert the client's attention to more constructive activities

And reflections.