

American Handbook of Psychiatry

THE EXISTENTIAL SCHOOL

James L. Foy

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THE EXISTENTIAL SCHOOL

James L. Foy

Introduction

The existential school in contemporary psychiatry is hardly a formal school at all, having no institutional arrangements, no curriculum, and no certification of candidates. The school is more like a movement or loose confederation of practitioners and theoreticians who share a common approach to the human person and to the varied distortions of human potential. The actual common denominator of this broadly based group of psychiatrists and psychotherapists would be their grounding in existential thinking, a major trend in modern philosophy that has left its imprint on many aspects of twentieth-century culture.

Ordinarily we do not think of academic philosophy as having an intimate connection with the developments in psychiatry over the past 100 years. Idealism, pragmatism, vitalism, logical positivism, and linguistic analysis have all contributed to the climate in which psychiatry has matured as a science and an art; however, these philosophical endeavors have not influenced theory or practice in specific ways. As a matter of fact,

psychiatrists have tended to be wary of the abstractions and controversies in philosophical thought, perhaps because they have been busy promulgating abstractions and controversies of their own. For example, a major philosophical issue, the mind-body problem, is generally given brief treatment in modern medicine and psychiatry, and it is dismissed too quickly as solved by a superficial nod in the direction of such concepts as interactionism, psychophysical parallelism, or epiphenomenalism. Careful and prolonged questioning of the mind-body problem will result in a tangle of unsettling and contradictory answers, which are so often swept under some convenient conceptual rug.

Freud as a builder of psychological theory was also a philosopher of sorts, a particularly inconsistent and even eccentric philosopher. It is remarkable that Freudians have been able to accommodate psychoanalytic theory to such divergent philosophies as neo-Kantian idealism, epiphenomenalism, and mechanistic materialism. Existential philosophy offers the example of a consistent and systematic philosophical penetration of psychiatric theory and practice. This is the only instance where a rigorous philosophical method and viewpoint has had a decisive influence on the formation of a school of psychiatry, with its own constructs and clinical applications.

If existential philosophy has left its mark on psychiatry this is only one

of many impacts it has had upon the entire edifice of modern culture. Its influence has been conspicuous in all the arts, humanities, social sciences, religion and theology. It has proposed a critique of reductionistic and dehumanizing tendencies in contemporary science and technology, and at the same time it has revitalized the older humanistic tradition with ideas open to change and the expansion of human possibilities. In politics existential thinking has been welcomed in both conservative and radical wings. The career of Jean-Paul Sartre gives testimony to an existentialist's participation in all the controversies of our time: political, social, artistic, and intellectual.

Some Basic Definitions

Existentialism as a term almost defies definition. As an "ism" or ideology, the noun form is universally rejected by existential thinkers, who remain suspicious of global systems and catchall labels. The adjective form, existential, is used more widely and seems a necessary generic term to be applied to thinkers, psychiatrists, and psychotherapists who share an existential orientation. Existential then pertains to a viewpoint on man that recognizes the unique place and presence of individual human existence and the centrality of human action and freedom within human existence. "Existence" is a word strictly reserved for man and never applied to the being of other nonhuman things. Warnock describes the existential thinker as promoting human freedom, the possibilities of action based on choice, and the

primacy of an ethical commitment. Existential philosophy is a practical philosophy. Barrett offers a similar definition. Copleston emphasizes the dramatic quality in the existential viewpoint: the isolation in freedom of a self-transcending subject, exposed and threatened but choosing who he is to become under the staggering limits of his human condition. Olson, in his useful introduction to the existential mode of thought, indicates the principal themes related by the philosophers, and, I might add, by the psychiatrists as well. These key themes are: values, anxiety, reason and unreason, freedom, authenticity, the other person, and death.

Phenomenology is a term closely related to the existential approach to man, his situation, and his world. Phenomenology is the method of the existential thinker, the disciplined and rigorous manner in which he describes and elucidates human existence. Phenomenology is defined as a science of the subjective, the descriptive analysis of subjective process, the analysis of things as they appear to human consciousness. To the phenomenologist consciousness is not some vague container or receptacle of representations; it is strictly conceived as an act of intentionality, a process of connecting and relating subject to object, a subject pointing to, intending an object. All existential thinkers acknowledge their debt to the founder of phenomenology as a philosophical discipline. This seminal philosopher was Edmund Husserl, a genius of the century who developed from logician to pure philosopher to existentialist in his late years. By far the best exposition of phenomenology

and the phenomenological movement is the two- volume work by Spiegelberg.

Ontology is defined as the theory of being as being, and it is the fundamental enterprise of philosophical speculation. The term is more or less synonymous with metaphysics, although the existentialists prefer ontology since it leads back to the ground of being rather than beyond material substances. Ontology always refers to the most basic of sciences. Ontological, therefore, is the adjective form that pertains to the basic structures of being. Ontic is an adjective form that pertains to particular beings or entities and the facts about them.

Anthropology is a term used by the existentialists in a way that is quite different from its common usage in this country, where it is more or less synonymous with ethnology or the science of human culture. In European philosophy anthropology is defined, in very literal fashion, as the theory of man and his essential human structures. The compound term “philosophical anthropology” clarifies this concept for the British or American reader.

Dasein is a German word that one finds often enough untranslated in the existential texts. This term means literally there-being and it is sometimes rendered in English as human existence or human reality. It could also be rendered as being-here-and-now, keeping some of the human immediacy of

the original German. Daseinanalysis, therefore, is defined as the descriptive analysis and elucidation of a particular human existence, and as such is a term often employed by existential psychiatrists.

Philosophical Perspectives

Existential thinking and more recently existential phenomenology are products of European intellectual history. The original sources come from writers in Scandinavia, Russia, Germany, France, Italy, and Spain. British and American philosophy, until quite recently, was unreceptive to this style of thinking. An important exception is William James, whose lectures on religious experience have an existential theme and temper. The roots of existential thought lie deep in history, and their outline may be discerned in works by the pre-Socratic Greeks, Augustine, Dante, Pascal, and certain German Romantics. The mid-nineteenth century affords the time and place for the full, bold statements of existential thought in revolt against the hypocrisies, systems, and utopias of that age. Dostoevsky's short novel *Notes from the Underground* is a disturbing overture to existential revolt. The novelist, who was always a perceptive psychologist, dissects the dehumanizing effects of the advancing industrial age, so enthralled with scientism, progress, and the crystal palaces of the great exhibitions. Dostoevsky asserts an alarming and crude version of human freedom and responsibility in the face of mass society, conformity, and scientific

naturalism.

Friedrich Nietzsche is another more forceful example of the European intellectual in existential revolt against the received ideas and complacencies of his time. Philosopher, poet, and psychologist, he became a specialist in unmasking the self-deceptions that enabled his contemporaries to live in a divided world, a world split between ideal and reality, religion and ungodliness. In a series of cruel and unmerciful books he spoke for a ruthless sincerity and a facing up to the epidemic phoniness of modern life.

Kierkegaard

By far the most important single innovator within nineteenth-century existential thought was Søren Kierkegaard, who died in 1855 after a short brilliant career as literary gadfly, serious philosopher, and religious thinker in his native Denmark. Kierkegaard's voluminous works were rediscovered in the early years of this century and translated into all European languages. His influence as the father of existential thinking has been persuasive and profound, and his influence continues to grow in the human sciences, such as psychiatry, because of the provocative and heuristic value of his work. This is not the place to survey his prolific and varied output; however, his role as an insightful psychologist of human reality deserves special attention. In an early work like *Either/Or*, a miscellany of fiction and commentary, Kierkegaard

analyzes the pleasure principle in the individual's everyday life. His exposition of the erotic and its subtle effect upon many areas of behavior, his discussion of techniques of self-deception, defensive posturing, and hidden motivations, all show him to be a depth psychologist very much in advance of his contemporaries. His repeated excursions into self-analysis indicate that he had a clinician's grasp of "identity crisis" and the unconscious workings of conscience. These self-analyses also provide a theoretical framework for understanding neurotic defenses and syndromes. In many books he returns to an analysis of anxiety, boredom, indecision, the absurd, commitment, and the lack of it.

Acting out of religious conviction and suppositions, Kierkegaard encounters human reality in its strictly individual and personal form, and not in its abstract form as man in general. He always writes about *my* existence in all its concrete and irreplaceable uniqueness. His self-psychology receives its most thorough elucidation in his book on despair, *Sickness unto Death*. This masterful existential analysis of depression is widely applied in existentially oriented psychotherapy. After discussing the possibility of a despair that is unconscious or the despairing unconsciousness of having a self, Kierkegaard goes on to elaborate in detail two conscious forms: (1) despair at not willing to be oneself, the despair of weakness; and (2) despair at willing despairingly to be oneself in defiance and rigidity. Although his own "therapy" is firmly based on religious experience and recognition of an eternal self, these clinical

insights into the torments of the despairer's emotional life lend themselves to a natural psychotherapeutic strategy and procedure.

Kierkegaard's insistence upon the primacy of existence, subjectivity, personal development, and human limits places him as a mentor to all twentieth-century existential thinkers. His legacy is in the unsparing manner in which he faced his own complex fate and inwardness and out of the struggle bequeathed intellectual and spiritual riches to later generations.

French and German Existential Thinkers

Kierkegaard's existential point of view has taken firm roots in philosophical reflections by French and German writers during the first half or more of this century. Gabriel Marcel's independent, sensitive, humanistic inquiry into a range of existential themes has attracted attention in psychiatry but has gained little influence. He has lectured several times in the United States, delivering the William James Lectures at Harvard in 1961, which summarized his life's work." Marcel has had an affiliation with American philosophy, particularly with Royce and Hocking. His work should be better known by psychiatrists and psychotherapists, since his emphasis on the intersubjective and participation coincides with familiar existential preoccupations of therapists. Marcel has reflected deeply on the human situation, on the body as relation to the world, on paternity, on creative

fidelity, and on suicide.

Albert Camus and Jean-Paul Sartre are the most widely known figures in the French school. It is only in his earliest writings that Camus can be considered an existential thinker, and his essays *The Myth of Sisyphus* are important as psychological explorations. The same holds true, of course, in regard to his early novels and plays. Sartre also is famous for his versatility as the author of novels, stories, dramas, autobiography, criticism, and philosophical texts. His evolution from ontological existentialist to existential Marxist provides evidence of both consistency and inconsistency in his thought. His lengthy and difficult text, *Being and Nothingness*, appeared in France in 1943. This book has had extraordinary influence on existential psychiatry, perhaps for the reason that it is read for its rich psychological analyses rather than for its strict ontological speculations. Sartre contributes splendid phenomenological descriptions of the body, sexuality, desire, sadomasochism, hostile situations, character defenses, which he terms “bad faith,” and most pointedly an extended analysis of human freedom and responsibility. Sartre’s later Marxist-oriented revisionism had had little influence on psychiatry; however, the Scottish psychiatrist R. D. Laing has shown a continued responsiveness to Sartre’s work.

The last important existential philosopher from France is Maurice Merleau-Ponty, who died in 1961, in midcareer. He was associated with

Sartre for a time and like him was deeply indebted to Husserl and Heidegger. Merleau-Ponty was trained in psychology and was a serious student of psychopathology and psychoanalysis, all of which highly recommends him to the existential movement in psychiatry, where his reputation has steadily grown since his death. His early work, *Phenomenology of Perception*, an analysis of perception and the role of the body-subject, will likely have expanding influence in psychiatric and psychosomatic theory. His appreciation of braindamaged states and their psychopathology and the problems of psychoanalysis' are thoroughly informed and underlie an astute, meaningful existential interpretation. More than the other existential thinkers, Merleau-Ponty speaks the clinical language of the psychiatrist, while retaining his position as a gifted and disciplined philosopher.

In Germany the first scholar to respond to Kierkegaard's message was Karl Jaspers, the psychiatrist and philosopher, who died in 1969 after a long, honorable academic career. He spent only seven years in clinical psychiatry at Heidelberg before joining the Faculty of Philosophy, although that period enabled him to publish his *General Psychopathology*, which has had enormous prestige and influence in continental European psychiatry. Curiously enough, although this often revised text is phenomenological in method, it does not contain the writer's absorption with his philosophy of existence, the most significant contribution by him to the ideas of our time. As a philosopher Jaspers has consistently concentrated upon existential man: his world views,

his boundary situations, his encounter with truth, his search for the limits of technique and theory, his encompassing transcendental possibilities. All human sciences will continue to react to Jaspers' critique and questioning. His work has a lasting power, and as Stierlin has pointed out, behind some of his biases, an indifference to Freud, for example, Jaspers had a tough mind that warned against reducing man to theory, or worse, objectifying him through technological manipulation. In this regard Jaspers' critical appraisal of psychotherapy is worth reading for its wisdom about goals, levels of communication, limits, and practice.

Martin Buber and Paul Tillich are two existential thinkers who, though born in Germany, spent their later careers in other countries, where their influence on the mental health professions has been considerable. Buber, a Jew, was an early immigrant to Palestine where he taught until the end of his life. Mystical thought, theology, education, and philosophical anthropology were the cornerstones of his productive career. His earliest essay, *I and Thou*, is a classic existential text and paves the way for all his subsequent writings. Buber's relation to psychiatry is very relevant and has been summarized by Farber, an American psychoanalyst who first responded to the philosopher's work. In 1957 Buber visited the United States and lectured at the Washington School of Psychiatry on themes related to psychotherapy. Tillich, a theologian by vocation, came from Germany to the United States where he taught at Harvard and Chicago. As an existential thinker he had a broad knowledge of

and intense interest in psychology and psychotherapy. His popular book, *The Courage to Be*, is a Kierkegaardian reflection upon anxiety, despair, individualization, and acceptance. Tillich has had a major influence upon existential psychiatry in this country through his own writing, lecturing, and through his association with the psychoanalyst Rollo May.

Heidegger

All of the authors cited above have been affected by the elaborate and profound existential philosophy of the German thinker Martin Heidegger. His *magnum opus*, *Being and Time*, has dominated the entire movement since its publication in 1927. This work is the single most informing text for existential developments in clinical psychiatry, psychotherapy, and psychoanalysis. It has stimulated interpretation, misinterpretation, admiration, and reaction. It has provided an extensive, if difficult, vocabulary of new terms. It has introduced a wealth of ideas, some of which have already passed into the domain of cliché, as in the popular usage of the word “openness”. It has been both praised and damned for its acknowledged heaviness and difficulty. Its author has gone on to other philosophical interests, but this book, actually an incomplete work, has been recognized as the bible of the existential school.

Hannah Arendt and others have attested to the importance of Heidegger as a thinker of profundity and originality. His reputation has risen to rival that

of Husserl's, for whom he was an assistant and later the successor in the Chair of Philosophy at the University of Freiburg. Heidegger's ambitions to overthrow traditional metaphysics and recover the structures of being will not necessarily illuminate his significance for the human sciences. Rather it is his creative thinking about the being of human being, the analytics of Dasein, that challenges us to rethink our own theory and practice.

Human existence is a standing out, an emergence of being or a becoming. Dasein always implies the personal pronoun: "I am," "you are." Dasein is essentially its own *possibility*, but its being is not given for once and for all, to unfold automatically like things in the organic world. Human existence discloses itself, questions itself, and chooses itself in its becoming, and it can be won or lost, it can be gained or forfeited. This is what Heidegger means by the concepts authentic and inauthentic existence: existence owned or existence disowned. We can understand another human being only as we see what he is moving toward, what he is becoming by fulfilling himself or depleting himself. As we will see over and over again, existential thinking returns to the possibilities of being human in human beings.

For Heidegger the fundamental existential constitution of Dasein is being-in-the-world, which must be grasped as a unitary phenomenon. That is to say, human existence does not rest inside a world, but rather it is given within a world, it is together with a world; and spatiality is something derived

from the primary condition of being-in-the-world. The consequences of this original constitution are considerable, since this establishes an attack upon the traditional dichotomy between subject and object, an attack that rejects the Cartesian split that has afflicted psychology and psychiatry for centuries. Being-in-the-world supplants all closed models; be it a black box with input and output, an inside brain with representations of what is out there, or a pure psychic subjectivity. Human existence is always and already mixed up with a world. There is a worldishness about our very existence. We arc our horizons, our landscapes, our abodes. Nature and the things out there in the environment come later and appear as afterthoughts to our immediate presence within a world.

The analysis of the existential world or worlds becomes a central task for basic psychiatry, and it has been pursued by the clinicians we will discuss below. Heidegger himself distinguishes the *Umwelt* and the *Mitwelt*. The *Umwelt* is the first and a nearest world of the body and its proximate situation. The *Mitwelt* is the with-world of coexistence, Dasein's being with others, which determines its own hazards and opportunities. There is the everyday world of the everyday self alongside of everybody else. This is the ordinary world of the "they" as in "they say it's going to rain." The impersonal self-world relation is the commonplace condition of all of us and leads directly to an inauthentic realm of conformity, anonymity, and facelessness. Contrasted with this is the condition of coexistence in openness and the co-

presence of Dasein to Dasein. This is the realm of existential encounter and authentic meeting face to face, where our own greatest possibilities are discovered in our solicitous being with others. The concept of encounter, so important in psychiatry and psychotherapy, is derived from an ontological formulation. First and foremost we have our being in a world of others.

Human existence has a peculiarly outgoing or foregoing structure, because our becoming is never finished until the moment we die. To live is to take ownership of the project of our personal existence. According to common experience an aim is something I have before me, something ahead of me. When I set a specific aim for myself, for example, the goal of climbing Mt. Everest, I conceive of it as a possibility that I may or may not achieve sometime in the future. Until then I let this possibility, in advance, determine all the steps I take here and now: I undergo a rigorous training, I expose myself to hardship and danger, I bend my energies toward organizing my expedition, collecting equipment, recruiting guides—and all this for the sake of, or to take care of, a possibility that may never be realized but on whose outcome I have staked my life's efforts.

Remarkable as the pursuit and perhaps the achievement of such a goal is, for Heidegger what is even more remarkable is how man must be to be capable of heading out toward a goal at all. For this he must be able to project himself forward into a future, to take aim at as yet completely “nonexistent”

things and events, and to take direction from them for what should be done here and now. Above all, he must be able to understand himself, not only in what he was and what he is, but also in what he can become—and thus move toward himself, so to speak, clothed in his own possibilities. In other words, man is able to transcend, to go out beyond himself as he already is to the full range of the possibilities of his being. This is the unique concept of being that Heidegger reveals in human existence and to which he gives the name care. The temporal meaning of this fore-throw structure of care is clearly the future. For Heidegger the future is the primary marker and mode of time.

The past is the domain of the being I already am and have been. This is the fact of my being, marked by a thrownness into the world, a “has been” left to myself and stuck with my own facticity. The present is the moment as I fall captive to the world, giving myself away to everyday busyness in time that claims my inauthentic, disowned self.

For Heidegger existence as care is actually the unity of time—future, past, and present. Man does not merely exist in time like things; on the contrary, man originates or brings himself to ripeness as time. So much of Heidegger’s thought is a meditation on existence, care, and time, locating identical structures in each dimension.

If Dasein is a self-disclosing, forward- moving, care-taking, future-

directed being, there is one possibility that always beckons each human existence, and that master possibility is death. Dasein is being-toward-death, my death that is only mine to die. In his analysis of death Heidegger tends to see the ontological structure as the most authentic and proper possibility for human reality. This is not a pessimistic philosophy, but rather a living reminder of the seriousness of living itself. Resoluteness is the corollary of being-toward- death, and it calls us and rededicates us to authentic existence, to take care of our being. Heidegger would say that no one can take someone else's death away from him. "They" say that death will come someday, but not yet, and the power and certainty of it are denied. As soon as man is born, he is old enough to die; nevertheless, no one is so old that he does not possess a future.

Space does not permit an account of Heidegger's analyses of dread and guilt, which he approaches as ontologically obligatory for human existence. These analyses should not be confused with neurotic anxiety and neurotic guilt. Dread as a basic human mood is elucidated in Heidegger's essay, "What is Metaphysics?" The imposing contribution of this body of thought is a thoroughgoing hermeneutics of human existence, and this penetrating interpretation seems to be a by-product of Heidegger's project of investigating the question of being. The existential school has assimilated, applied, and, in some instances, elaborated on this complex and rich interpretation.

Existential Aspects of Basic Psychiatry

The development of the phenomenological school in psychology has a bearing on the emergence of the existential approach, since the phenomenological method is fastened upon by nearly all existentialists. Phenomenology is also identified with Gestalt psychology and the now classical investigations of perception. As a method of dwelling on an exhaustive description of psychological phenomena and withholding explanatory hypotheses, phenomenology was later applied to social psychology and to the psychology of personality. In his Terry Lectures, entitled *Becoming*, Allport made an important contribution in bringing an existential viewpoint to the study of persons against a background of phenomenological orientation. Other American psychologists, Maslow and Rogers, made like-minded approaches, and recently their work has stimulated a lively movement of humanistic psychology with a wide variety of applications in the clinical field, from encounter groups to body awareness exercises.

While these developments in American psychology have taken place in the past several decades, existential phenomenology has had a much longer and more powerful effect upon European psychology and psychiatry. This fact was brought vividly to the attention of Americans with the very significant publication in 1958 of the book *Existence*, which has received wide attention.

The editors of the book, May, Ellenberger, and Angel, gathered together essays on basic approaches and clinical case studies, translated into English for the first time. This book focused American attention on the contributions of the psychiatrists Binswanger, Minkowski, and Straus.

Basic psychiatry has been genuinely informed and instructed through the critical work of Erwin Straus, whose career has bridged European and American circles. He is indebted to Husserl and phenomenology because of his reworking of the concept of the lived world, the world of firsthand experience. Straus claims Heidegger as his ally in his similar, constitutive revelation of being-in-the-world. In an early book Straus undertakes a critical examination of stimulus-response psychology and the Pavlovian school. His critique is supported by detailed phenomenological investigations of sense experience and body movement. Because of his lifelong interest in the senses and movement, he has completed studies of hallucinations, anosagnosia, catatonic states, and a variety of neurological disorders. His mastery of the nuances of the clinical problems involved is exceptional. Straus's selected papers reveal his existential orientation, especially his paper "The Upright Posture," a brilliant elucidation of the "standing" position and the presence of human existence. At this point in time his teaching has a moderating influence upon a technologically slanted and mechanistic trend in American psychiatry. Straus's reputation among a group of young American philosophers is growing through his regularly held conferences in Lexington, Kentucky,

addressed to pure and applied phenomenology.

A basic science of psychiatry is not likely to mature from the existential example and approach; instead, the movement seems to offer a style and content for criticizing scientific doctrines of man, mind, and behavior. Benda and Serban offer a critical look at Freudian theory that relates to Binswanger's earlier views. Existential psychology has been called a third force, an alternative between Freud's natural-scientific model and Skinner's behavioristic model. Indeed, the concept of model applied to man is anathema to existential thought. Van Kaam has attempted a more ambitious survey of the foundations for an anthropological phenomenology in psychology based on existential theory, but unfortunately his work has received only minimal attention.

Existential Aspects of Clinical Psychiatry

Mention should be made of two early interpreters of existential thinking to American clinicians. Wolff published a number of case studies from his own practice that placed extraordinary emphasis on crisis, values, and goals. His method included dream analysis. Sonnemann was one of the first to present Binswanger's work to non-German readers, and his neglected scholarly book, *Existence and Therapy*, is rich with references to the European existential tradition and has a fine grasp of the historical situation. His

avoidance of case material might explain the book's neglect among psychiatrists.

Existential Case Studies

A reading of clinical case studies is recommended as the first approach to existential psychiatry. The material now available is extensive and useful. These cases tell us the “what” of psychopathology, rather than explaining the “why” of symptoms and syndromes. Van Den Berg's case of an obsessional and phobic young man illustrates the clinician's methodical description of his patient's world, bodily experiences, relations with others, spatiality, and temporality. Descriptions of lived space and lived time in psychopathological states are hallmarks of all these studies. Laing's cases of schizoid states and schizophrenia are now fairly well known in psychiatry. Boss has published studies of a variety of sexual perversions. He has also written on the existential analysis of dreams. Binswanger's case studies of mania and schizophrenia will be commented on separately. Cases by Minkowski, Von Gebattel, and Kuhn are available in the collection *Existence*.

Against the background of his clinical practice of psychoanalysis, Farber has collected material on anxiety neurosis, depression, hysteria, and schizophrenia. His articles contain an existential re-examination of the psychopathology of will. The dislocations, perversions, and promotions of will

and willfulness are delineated in neurotic problems and some areas of scientific interest, such as sex research. Farber's analyses of the uses, misuses, and abuses of the modern will have influenced May, who expands on their relevance for contemporary values and attitudes regarding sexuality and love. An excellent overview of sex and existence has been presented by Van Kaam.

Lvnd, a sociologist, has written an astute and clinically valuable study of shame, personality, and an existential interpretation of identity. Her work is filled with clinical examples from literature, a practice that is common to many of the existentialists. Her treatment of the sense of identity provides a commentary on and a revision of Erikson's familiar concept. Her work is useful to psychotherapists willing to explore existential dimensions of their endeavors.

Binswanger

Ludwig Binswanger, the Swiss psychiatrist, scholar, and philosopher who died in 1965, is the exemplary clinician of the existential movement. His teaching, his books and articles, his administration of a mental hospital, his example, all serve to illustrate his formative role and enduring influence as an existential thinker. Born into a family tradition that included many prominent psychiatrists over several generations, he worked at the sanatorium at Kreuzlingen, on the shores of Lake Constance. Binswanger is the most

thorough psychiatric interpreter of Heidegger from the period of *Being and Time*. He has called his particular reading of this text a “fruitful misunderstanding,” and, indeed, his response to Heidegger is more creative than imitative. Binswanger’s psychiatry cannot be understood on the basis of Heidegger alone. There are equal elements of phenomenology (descriptions of lived time and lived space), Kierkegaard’s self psychology, Buber’s dialogue between I and Thou, not to mention essential ingredients from Bleuler and Freud.

Binswanger was a lifelong friend of Freud, with whom he had important theoretical differences. He was an early champion of psychoanalysis in Switzerland and delivered an important address at Freud’s eightieth birthday celebration. It was after Freud’s death that he systematically developed his ideas on existential analysis, although he was working out his position from the early 1930’s. In spite of open difference Freud never broke off warm personal relations with Binswanger, as was so often the case with Freud and his dissident disciples.

Binswanger’s contributions include his critical-theoretical writings and a number of long case histories that contain the application of his ideas to the study of lives, rendered in an elegant and admirable style. From Heidegger he develops the notion that man is an essentially temporal being, that man exists to the degree that he stands facing his own future, and that out of this relation

to a future he orders his present and connects it with his past. Binswanger observed in his patients a core of trouble connected with the loss of direction and meaning in their lives, which fundamentally meant that they no longer stood in meaningful relation to time itself—they could not bind it “care-fully” and harmoniously together.

Elaborating on the individual and personal application of Dasein as being-in-the-world and the meaning structure of care as it actually manifests itself in a particular human being’s daily life, Binswanger searches out the world design of his patient. The patient’s expression and transformation of care is analyzed for his existential worlds. The first and nearest world of the *Umwelt* and the world with others in direct relations, the *Mitwelt*, have been discussed above. Binswanger adds the *Eigenwelt*, the world of self in its continuity, consistency, and identity. Psychopathology is possible because the world design of the patient is constricted, simplified, distorted, or depleted. Pathology is always a loss of world content, a loss of the complexity of contexts of reference. Illness is viewed as the overpowering of Dasein by one world design.

Binswanger’s clinical case studies are, for the most part, histories and Daseinanalyses of manic and schizophrenic persons. In a number of articles on mania he first worked out the manic mode of being-in-the-world. In the flighty and surface world of the manic patient the future holds everything,

and he propels himself headlong into a future brimming over with too many possibilities. His care is strewn before him recklessly, and his existence is squandered among a fleeting chaos of things and faces. Manic phenomena lend themselves readily to an existential interpretation of temporality and being-in-the-world, and Binswanger returns frequently to these clinical examples. His case studies of schizophrenia are more complex, “The Case of Ellen West” being the longest and most detailed of them. It has achieved the status of a classic case, but more than a clinical history, it is a human narrative of great depth and poignancy. “Ellen West” was not treated by Binswanger himself. She had been examined, treated, and psychoanalyzed by a number of eminent specialists. Binswanger reconstructed the study from exhaustive reports, diagnostic evaluations, treatment summaries, her diaries, poems, and letters, all of which he collected after her death. The analysis defies any brief summary; however, this document demonstrates how Binswanger supplements psychoanalytic interpretation with a basic existential interpretation of the patient’s tortuously divided world design, a world split irrevocably between an upper, ethereal one and a lower, earthy one. It is the existential dilemma of the obsessive-compulsive person pushed to extreme limits and beyond, into psychosis. Binswanger’s other cases, “Lola Voss,” for example, deserve wider readership. These human narratives are his finest achievement.

Existential analysis is not a psychopathology, nor is it clinical research nor

any kind of objectifying research. Its results have first to be recast by psychopathology into forms that are peculiar to it. . . . psychopathology would be digging its own grave were it not always striving to test its concepts of functions against the phenomenal contents to which these concepts are applied and to enrich and deepen them through the latter. Additionally, existential analysis satisfies the demands for a deeper insight into the nature and origin of psychopathological symptoms. If in these symptoms we recognize "facts of communication"—namely, disturbances and difficulties in communication—we should do our utmost to retrace their causes—retrace them, that is, to the fact that the mentally ill live in "worlds" different from ours. . . . Thus we also comply here with a *therapeutic* demand.

Binswanger's work was first brought to the notice of American psychiatrists by Weigert, who presented his analysis of the ontological structures of care and love. Weigert has also recommended the work of Max Scheler to psychiatrists. Scheler was an existential sociologist and philosopher of the first quarter of this century, whose book on sympathy and fellow feeling has had a persistent influence on Binswanger and psychoanalysts from a number of schools. Binswanger has received commentaries by Blauner and Kahn and a more critical examination by Arieti and Schmidl, who detect a therapeutic nihilism in his Daseinanalysis and a rivalry with psychoanalysis. Stierlin also suspects the therapeutic usefulness of a trend toward dedifferentiation in Daseinanalysis, with its undermining of unconscious processes, transference phenomena, and any convergence with the social sciences. In answer to these objections Binswanger repeatedly claimed that his work was an elucidation of basic forms of existence, an

infrastructure, upon which psychoanalysis or other systems of explanatory hypotheses could build their theory and procedures for treatment.

Existential Aspects of Psychotherapy

If existential psychiatry does not propose an encompassing theory or prescribe techniques for the conduct of treatment, nevertheless, it does hold significant implications for psychotherapy. Existentially minded psychotherapists have come from many traditions: Freudian, neo-Freudian, and Adlerian. Methods and techniques such as free association, dream analysis, attention to self-systems and interpersonal relations are not abandoned, but rather are taken up in an approach to the patient that has special therapeutic consequences. Flexibility and individualization within the therapeutic situation is given primary emphasis, and diagnostic labeling is supplanted by more extensive descriptions of where the patient is at and what he commences with at the outset of psychotherapy.

The therapeutic consequences of an existential approach are outlined by Werner Mendel. He delineates six guidelines, each of which would seem to indicate a specific strategy to be adopted by the psychotherapist. His first point is that when it comes to the past of a given human being, history is constantly rewritten. The past, as it is reconstructed from memories, can never be recovered in some global, permanent form of how it really was with

this person. All of us revise our past as we go along, since memory itself is dependent upon the present situation and, often enough, upon one's orientation toward the future. It is to be noted that much current thinking in historical studies recognizes revisionism as a necessary task for each generation. Personal histories likewise require their own revision, a looking backward again and again to sum up the relevant past. A second time-related point insists upon the influence that the future has and will continue to have upon the outcome of therapy. The future is before the patient in his plans, expectations, anticipations, and chosen goals.

Third, there is a readiness to dwell on conscious material, to let it speak for itself without applying formulas to reduce it to something else, to something underneath. This means that a phenomenological attitude is maintained toward accounts of symptoms, events, fantasies, and dreams. Manifest content is patiently described before turning to a hidden latent content. A fourth point is that the reality of the therapeutic encounter between therapist and patient is recognized, without reducing every vicissitude in the relationship to manifestations of transference or countertransference.

Fifth, in existential therapy there is an important distinction made between human saying and human doing. A person puts more of his existence into what he does than into what he says. Convergence or divergence

between saying and doing is attended to in the therapy. Sixth, the point is made that decision and action are integral to the process of therapy, and are not to be conceived as interminably delayed until the work of therapy is accomplished. Action, more than reflection upon past action, is the central theme of the ongoing process.

In *Psychology and the Human Dilemma* Rollo May has collected his articles on existentialism and related problems, and in this book he discusses a number of issues involving psychoanalysis, analytical psychotherapy, and existential thought. He continues a mode of inquiry initiated by Tillich. May's work has continued to enlarge on the context and meaning of psychotherapy, with particular attention to its goals. He has some cautionary things to say about the irrationalist aberration in some existential promotions of immediacy and here-and-now experience, a tendency found in the recent American interest in Zen Buddhism.

May has been sensitive to the charge that the contemporary psychotherapist is often an agent of the culture, a technician whose job is to pave the way to adjustment and conformity to group norms and societal pressures. He locates a powerful remedy for the techniques of adjustment in an existentially oriented therapy that undercuts objectification and manipulation of the patient and, at the same time, seeks a goal in the fulfillment of personal existence. May would insist that the goal of any

psychotherapeutic endeavor should be the patient's coming to himself, experiencing his existence as both his limits and his possibilities, accepting his anxiety and guilt and constructing upon them a responsible commitment to his unique potentialities. May and Colm have been responsive to the encountering context of psychotherapy. Coexistence, presence, and openness underlie the actual relationship between patient and therapist. There are intuitive dimensions to the encounter that are reciprocal and deserve as much attention as transference and countertransference. In a deeper sense perhaps transference and countertransference are made possible because of the encountering ground upon which both participants meet. There is nothing sentimental about the encounter, nor is it susceptible to a neat intellectual formulation. The reality of encounter is the most neglected subject in the conventional psychotherapies; while, on the other hand, encounter is the most misrepresented subject in the unconventional psychotherapies, with their frantic appeals to nudity, touching, and stroking as means of enhancing it.

Existential approaches to psychotherapy have been influenced by other practitioners and authors. Victor Frankl, an Austrian who survived the Nazi concentration camps, has popularized his logotherapy in several books. Logotherapy is based upon what Frankl calls the human will to meaning, described as an existential *a priori* to all psychotherapeutic aims. His work recovers the importance of values to all forms of psychotherapy. The loss of

the meaning of life is not a unitary concept, but rather a reflection of a set of specific values the patient has abandoned, misplaced, or neglected to articulate. The therapist's role is not to hand over values to his patient, but to be a detective in the patient's search for his own values. Jordan Scher, an American editor and therapist, has written extensively on the existential approach. His ontanalysis is indebted to Binswanger and Frankl, but is stamped with his own broad clinical and social interests and points in the direction of an existential social psychiatry.

Among American psychoanalysts Weigert and Weisman have shown a willingness to assimilate existential views into neo-Freudian and Freudian theory and practice. The Swiss psychoanalyst Medard Boss, on the other hand, has published a lengthy and radical existential demolition of analytic theory, while attempting to preserve the trappings of analytic procedure and method. Boss takes his cue from the later work of Heidegger. His book, *Psychoanalysis and Dasein-analysis*, has four parts: an exposition of Heidegger's analytics of Dasein, a re-evaluation of basic psychoanalytic theory in the light of this, a discussion of neurotic syndromes with some excellent case material, and an informative section on the impact of Daseinanalysis on orthodox analytic techniques. Boss seems to carry out the therapeutic program of Binswanger's existential analysis, under the banner of an idiosyncratic psychoanalysis.

Other psychotherapies have their existentialists; however, they seem to be minority voices. Group psychotherapy, which is quite naturally suited to an existential orientation, has been reformulated by many authors who favor some kind of experiential learning. Mullan expounds this view in a number of papers. Communications theory and family psychotherapy have the Palo Alto group among their early pioneers, some of whose members present an existential viewpoint. Child psychotherapists of an existential persuasion are represented in a collection of clinical articles edited by Moustakas. Burton has built on an existential base in elaborating his humanistic psychotherapy.

These developments in the psychotherapies are all of recent vintage, and the future holds possibilities for more existential inroads into theory and practice. The most important change existential approaches have brought about in the psychotherapies has been the loosening of rigid, doctrinaire concepts and procedures.

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