## The International Forum for

# LOGOTHERAPY

Journal of Search for Meaning

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THE INTERNATIONAL FORUM FOR LOGOTHERAPY is the official publication of the Viktor Frankl Institute of Logotherapy (addresses below). It presents the meaning-oriented existential philosophy and therapy developed by Dr. Viktor Frankl and expanded by logotherapists throughout the world, working in counseling, education, medicine, nursing, psychology, social work and other fields where the question of meaning becomes pertinent. The FORUM publishes experiential reports, theoretical papers, personal essays, research studies, innovative logotherapeutic techniques for individuals and groups, and book reviews.

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### LOGOTHERAPY'S KNOWLEDGE AND WISDOM

#### Rachel Asagba

This article was written on the occasion of Elisabeth Lukas' 50th birthday "on behalf of those whom she helped recover through her work in her practice and her writings." The editors of the Forum join Rachel Asagba in saying "a big thank-you for the work done."

Elisabeth Lukas has demonstrated the practical application of logotherapy in many fields of human behavior. She has shown that it can spread a psychological safety net under people not only in the Western world but also in developing countries. She has shown that it provides tools for clinical psychology, and it provides what Frankl calls "medical ministry" for the suffering. This caring is supplied through knowledge and wisdom.



The logotherapists' knowledge is based on their understanding of human nature. Their wisdom prevents malpractice and provides professional ethical guidelines.

#### The Knowledge of Logotherapy

According to Lukas, logotherapy has a deep understanding of what human beings basically are and what they strive for; and it guides them in their search. It comprehends the human spirit and its resources, and makes therapeutic use of them. It knows what keeps people going in situations of unavoidable suffering and supports them on their way to meaningful solutions.

Lukas demonstrated the unique contribution of logotherapy at a Munich conference for gynecologists. Questions that were discussed included the who and how of conveying the message to parents when a badly deformed child is to be born. General agreement was that there is not just one way to do it. Logotherapy's emphasis is to help the parents understand that the important issue is not that the child is "normal" or "abnormal"—the

important issue is the meaning that can be actualized in taking care of the child in either case. Parents need to be told to prepare for both positive and negative eventualities of the child, and they need to be helped to see that the assignment is to care for the child with love and affection. The logotherapies arouses the parents' "defiant power of their spirit," as a precondition for a modification of attitudes. Drawing on the resources of the human spirit provides strength needed to find fulfillment within their fate.

Socratic dialogue can guide parents to realize that it is not always necessary, or possible, to be "happy" parents--even with "normal" children. Sometimes the parents with handicapped children find even greater fulfillment. The handicapped child does not have to be a source of sadness, but rather can be a challenge to make the most of the opportunity.

Such positive attitudes, Lukas explained, require an existential anchoring point. Logotherapy does not presume to compete with religion. But if we are not anchored in some kind of faith that enables us to face the ups and downs of life, we have to face these questions through philosophy. Questions such as "why?" or "why me?" demand answers--and therapists can help find answers in the teachings of logotherapy.

Other schools of psychiatry deal with death and suffering through educating and theorizing (for instance, Kubler-Ross' stages of accepting death). Logotherapy is one of the few schools that gives existential help to those suffering from Frankl's "tragic triad."

#### Meaning in Developing Countries

The logotherapeutic experience of finding meaning in suffering can help clients discover otherwise hidden opportunities. This is possible in all sorts of unavoidable suffering, including suffering experienced in developing countries where economic crises are the cause of much pain. The challenge often is that of survival. Some persons turn to corruption, drug dealing, and other unbealthy ways to survive.

Logotherapy distinguishes situations of fate (which we cannot change) and those of freedom (which we can change). We must accept our genetic "fate" that we are Africans or Nigerians, but also we must use our areas of freedom, tempered by responsibility, and develop self-reliance within our capabilities. Instead of searching for white-collar jobs--not everyone can be a doctor or manager--we can go back to the land and plant crops or make use of our raw materials to produce something that is needed.

Few people think of what they can do for the country--instead they just complain about the situation. We cannot change our "fate" of being Nigerians, but we can work together and see that our country develops like Germany or Austria did after the first and the second World Wars. We can transform Africa into a better place to live.

#### The Wisdom of Logotherapy

Scientific knowledge alone is not enough to save the human race, as we have learned from atomic research. Scientific knowledge alone is not enough to keep us healthy. Knowledge must be complemented by wisdom. This is true even for clinical psychology whose therapeutic techniques and psychological strategies too easily propel clients into subhuman channels that plunge them more deeply into illness.

What is the logotherapeutic wisdom that may have significance for clinical psychology? Not the development of fashionable techniques, but rather a consideration of the basic values and goals of all therapies. These ethical guidelines may be listed as:

- a) Normalize, don't psychologize,
- b) Encourage self-help, and
- c) Don't take away responsibility.

Lukas considers normalization an important aspect of clinical psychology. Patients may lose their trust in clinical psychology if they are psychologized instead of being helped to make things better for themselves.

Regarding the second ethical guideline--encouragement of self-help-Lukas points out that it is not the physicians who primarily cause a physical
or psychological wound to heal. They can treat a wound with ointments and
dressings but the process of healing is accomplished by the self-healing
powers of the body. Modern medicine increasingly is becoming aware that
health is more likely to be restored when the natural inner system is supported
than when the attempt is made to "drive out the devil with the Beelzebub" of
artificial chemical intervention.

Clinical psychology must become aware that not only are there psychological causes of illnesses, but also there are noetic forces of self-healing that can conquer such illnesses or even prevent them. A wise psychology will seek out and promote these self-healing forces so that wounds will heal, even when their origins cannot be discovered.

Self-help is successfully applied in such organizations as Weight Watchers and Alcoholics Anonymous. Many patients with chronic disorders

recover through the books or radio talks by Lukas, Frankl, and other logotherapists.

When I studied in Austria, I spent most of my time at the Medical Self-Help Center in Vienna. As a dietitian, psychologist, and candidate for logotherapy I witnessed the effectiveness of self-help in patients with chronic diseases. As a former obese patient with a history of depression, I feel now is the time that we in Africa must realize the importance of self-help, and we must encourage it.

Unfortunately not all people (even the experts) know the meaning of self-help. Sometimes they see it as something like self-medication. Self-help importantly includes an appeal to the resources of the human spirit, such as the will to meaning, goal orientation, and self-transcendence. As my contribution to mental health in Nigeria, I helped establish a medical self-help and referral center here. At present, in addition to counseling, a logotherapeutic approach to permanent weight reduction is offered. I hope that the assistance received from this center will change many peoples lives in Nigeria.

Related to the emphasis on self-help is the third ethical guideline stressed by Lukas: Responsibility must not be taken away from patients by medical personnel. Patients need to be directed and assisted to carry out their own responsibility.

This also concerns Nigerians as a nation. All people must make themselves accountable for the economic failure. Each person, rich or poor, can do something instead of blaming the leaders. We are free to act regardless of the conditions in which we find ourselves in our country.

Our Self-Help Center's major task is to stress responsibility of patients, rather than leave it to the doctors and medical personnel. Patients are encouraged to learn about their disease and about positive ways to live with it. For instance, the Center organizes education for diabetic self-help groups, and similar groups are established for patients with other chronic diseases. The importance of assuming accountability also is stressed in the weight-reduction program.

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