Meaning Therapy: Assessments And Interventions

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Abstract

This paper introduces meaning therapy (MT) as a recent extension of Viktor Frankl’s logotherapy with several important new features, such as being integrative, empirical, and positive. With meaning as a holistic, central construct, MT is inherently integrative. With its emphasis on contemporary meaning research, MT has firm empirical support. With respect to its positive orientation, MT distinguishes itself from most existential therapies by virtue of its focus on meaning-seeking and meaning-making as a positive value for a worthwhile life. This paper also introduces several instruments and meaning-based interventions developed by Wong.

Keywords

Meaning, purpose, existential anxiety, understanding, responsibility, authenticity, values, beliefs, worldview, meaning-seeking, self-transcendence, spirituality, freedom, death, autonomy, courage, logotherapy, Viktor Frankl

Introduction

Meaning matters more than we realize. We are only scratching the surface of the vast potential of meaning that is available for healing and flourishing. Most of us know intuitively that we experience the deepest satisfaction when we engage in meaningful activities and we feel fully alive, when we passionately pursue a worthy life goal. Recently, philosophers have attempted to delineate more precisely both the subjective and objective conditions for meaning and happiness (Haybron, 2013; Kauppinen, in press; Metz, 2013). Positive psychology research has also shown that meaning is the essence of human experience and is central to well-being (Hicks & Routledge, 2013; Wong, 2012a).

In the midst of a recent resurgence of interest in meaning research in philosophy and psychology, we owe a debt to Viktor Frankl, whose work creates a bridge between existential philosophy and positive psychology (Battistini & Russo-Netzer, 2014; Wong, 2009a). In addition, it was Frankl who first made a compelling case that the human quest for meaning was the heart and soul of psychotherapy, an approach buttressed by his own extraordinary survival experience in Nazi concentration camps (Frankl, 1985).

For Viktor Frankl, the primary objective of logotherapy, or meaning therapy, is to awaken people from everyday busyness and self-gratification to their spiritual potential of meaning fulfillment. The will to meaning is described as ‘man’s striving to fulfill as much meaning in his existence as possible, and to realize as much value in his life as possible’ (Frankl, 2010: p 85). He proposed that since the will to meaning is situated in the spiritual core of human nature, the meaning principle ought to be taken seriously in psychotherapy. Recently, Emmy van Deurzen and Martin Adams (Deurzen and Adams, 2010) also emphasized meaning and spirituality: ‘In the sense that life is about meaning creating, the spiritual dimension is the central axis of existential therapy’ (Deurzen & Adams, 2010: p 20).

What is new about meaning therapy (MT)

This paper introduces my integrative meaning therapy (MT), which evolves from Frankl’s logotherapy. While maintaining the basic tenets of logotherapy, MT also incorporates other therapeutic modalities, such as Cognitive-Behavioural Therapy, existential-humanistic therapy, narrative, and positive psychotherapy, with meaning as its central, organizing construct (Wong, 1997, 1998a, 1999, 2012b).

The motto of MT is: ‘Meaning is all we have, Relationship is all we need,’ in the context of psychotherapy. Consistent with Viktor Frankl (1985), MT focuses on existential meaning rather than associative meaning. Existential meaning deals with the meaning of human existence (Reker & Chamberlain, 2000), whereas associative meaning refers to rational and logical connectiveness in the natural world (Heintzelman & King, 2013). Meaning-seeking is regarded by Frankl as both a universal primary human motivation and a unique human capacity to make sense of the world and create values/belief systems. To search for meaning is to seek self-transcendence, which means to step out of ourselves and serve something or someone bigger than oneself.

Relationship is also of paramount importance in MT (Wong & Wong, 2013). The quality and depth of the relationship is the key to effective therapy. We are designed to survive and thrive in a relational world. The quest for meaning is not a solitary journey in a vacuum. It is embedded in a relational network, shaped by the social, cultural context. The therapeutic process provides an in vivo social context for clients to learn authentic interactions that contribute to personal growth and bonding.

In MT, relationship functions as a major common factor for effective psychotherapy, not simply because of the therapeutic alliance, but because of the therapeutic presence of the therapist. Therefore, cultivating the qualities of empathy, unconditional positive regard, and genuineness (Rogers, 1951) is important for meaning therapists and therapeutic success. Research has consistently demonstrated that relationship is the foundation for effective therapy (Wampold, 2009; Wampold, Goodheart, & Levant, 2007).

A positive approach

In a family of different types of existential therapies, MT distinguishes
itself as making meaning fulfillment the most important principle. When we help clients to be actively engaged in what really matters, such as serving a higher meaning and developing loving relationships, they will have the freedom and responsibility to live a vital and fulfilling life; by embracing meaning as their basic value orientation, they will be better able to transcend their existential conflicts and resolve personal predicaments.

Such a positive focus has important implications for how we do existential therapy. For example, even in the intake session, MT attempts to shift clients’ preoccupation with personal problems to thinking about the prospect of a more rewarding life through dereflection and Socratic dialogue — two techniques that will be explained later. That is why MT represents the application of existential positive psychology (Wong, 2009a).

**An integrative approach**

Meaning is all we have, because we are a meaning-seeking, meaning-making species, shaped by a culture of socially constructed symbols and moral norms. Thus, our ability to understand clients’ meaning systems, from their self-concept to their cultural context is the key to helping them. MT works with different aspects of meaning (Wong, 2013).

Since meaning is a holistic construct, including spiritual, cognitive, and behavioural dimensions, MT naturally combines mechanistic thinking with philosophical questions. For example, MT makes use of both CBT skills and phenomenological methods, as demanded by the unfolding of the therapeutic process. Since no single therapeutic approach is effective for all cases, it seems logical to adopt such a flexible, tailor-made approach to suit individual clients, as long as we do not lose sight of the central theme of meaning construction.

**An empirical approach**

The integrative and flexible approach of MT makes it readily conforming to the American Psychological Association’s standard for Evidence-Based Practice in Psychology (APA, 2006). It demands that effective therapy needs to use different empirically-based solutions to accommodate clients’ individual and cultural characteristics. Only an integrative approach can meet that demand. Norcross and Goldfried (2005) have shown that the integrative approach has strong empirical support.

In addition to integration, another point of departure from traditional existential therapies is my emphasis on evidence-based psychological practice rather than on existential philosophy. Just as thinking philosophically is necessary for good psychological research and practice (Deurzen & Adams, 2010; Kauppinen, in press), training in rigorous scientific research is important for existential therapy, in an age of management care and accountability (Vos, et al., 2014; Wong, 2010a). More recently, Hoffman, Vallejos, Cleare-Hoffman, and Rubin (2014) not only argued that existential therapy already has a solid empirical foundation, but also advocated the need for competence in empirically-based assessment and treatment for existential therapists. In other words, existential therapy and empirical research need to be organically connected.

In terms of practice and science integration, my own research career is closely linked to my existential concerns about the human condition and ways to achieve well-being and flourishing in spite of frustration, adversity, and death. In addition, I have explicitly done meaning research for more than three decades, from demonstrating spontaneous causal and existential attributions (Wong, 1991; Wong & Weiner, 1981) to developing a measure to assess the meaning-mindset (Wong, 2012c).

It is most gratifying that Breitbart and Poppito (2014a,b) have empirically demonstrated the effectiveness of meaning-centred counseling, based on Viktor Frankl’s logotherapy, in helping terminal cancer patients. The present MT makes it easier to test out the basic tenets of logotherapy in research and intervention (Wong, 2014, in press, a).

Most of my assessment and intervention tools are triggered by my experiential and clinical understanding, but grounded in empirical research in such areas as coping with frustration (Wong, 1995), stress appraisal (Peacock & Wong, 1990), effective coping (Wong, 1993; Wong, Reker, & Peacock, 2006), implicit theories of meaning (Wong, 1998b), adaptive life review (Wong & Watt, 1991), and death acceptance (Gesser, Wong, & Reker, 1987-88; Wong, Reker, & Gesser, 1994). These tools can be used in meaning therapy to equip clients with evidence-based adaptive coping skills. These assessments can also add a quantitative source of heuristics and verification.

The time for the idea of meaning has finally arrived in mainstream psychology. The last two years have witnessed an explosion of publications — books and journal articles — on meaning in life (e.g., Hicks & Routledge, 2013; Shaver & Mikulincer, 2012; Wong, 2012a). The preponderance of research evidence has supported the tenets and assumptions of logotherapy. Research has shown that presence of meaning plays a vital role in not only buttressing against stress (Halama, 2014) and ameliorating symptoms (Mascaro, 2014), but also contributing to well-being (Ryff, 2012; Steger, 2012) and to resilience in our lives (Park, 2013; Shmotkin & Shrira, 2013).

Furthermore, a recent meta-analysis of randomised control trials (RCTs) by Vos, Craig, and Cooper (2014) has provided some support for the effectiveness of existential therapy, especially when it includes structured interventions, psycho-education, take-home exercises, and explicit discussion on meaning in life with clients. All these components can be found in MT.

I have also advocated a semi-structured approach to meaning therapy for three main reasons. First of all, it will take the mystery out of existential
therapy. Secondly, it will make existential therapy more accessible to all therapists interested in incorporating MT in their practice. Thirdly, it makes MT a better candidate for RCTs.

**Meaning-centered assessments tools**

This paper only lists a sample of measures developed by me to illustrate the connection between my meaning research and MT. They are free for psychologists to use for research and clinical purposes.

**The content of meaning in life and quest for meaning.** Any of the following instruments can be used at the beginning and at the end of the counseling process to assess progress. They can also be used for various purposes, such as clarifying clients’ directions, value orientations, and life goals.

- **Personal Meaning Profile** (PMP & PMP-B) (Wong, 1998; Macdonald, Wong & Gingras, 2012). One of the few meaning measures that unpacks different sources of meaning.
- **Life Orientation Scale** (LOS; Wong, 2012c) was designed to determine the extent to which individuals hold a meaning mindset or global belief that life has intrinsic meaning.
- **Basic Psychological Needs Assessment Scale** (BPNAS; Wong, 2013). It measures the degree to which one has met one's basic needs in areas essential for the experience of positive meaning in life.
- **Quest for Meaning Scale** (QMS; Wong, 2011). This instrument was designed to assess where one stands at the present moment with respect to searching for the answers to eight important existential questions. It is useful as a springboard to start dialogue on existential issues.

**Death attitudes** (DAP-R; Wong, Reker, & Gesser, 1994). The most widely used scale to measure five major death attitudes, from death fear to death acceptance. It can also be used to assess suicidal ideation.

**Tragic optimism** (LAS; Wong, Leung, Steinfurth, & Vroon, 2002; Wong, 2009b). A scale that measures attitudes important to maintaining optimism in tragic or dire situations. This can be used in conjunction with Frankl’s Meaning Triangle (Freedom of Will, Will to meaning, and Meaning of life.)

**Measuring effective stress appraisal and coping strategies**

- **Stress Appraisal Measure** (SAM; Peacock & Wong, 1990) - The most widely used appraisal measure. This can be used to assess whether clients are able to see stress as a controllable challenge and to make more positive re-appraisals as a result of counseling.
- **Coping Schema Inventory-Revised** (CSI-R; Wong, Reker, & Peacock, 2006) - The most comprehensive coping measure, which includes existential and religious coping subscales. Typically, it is used within the framework of Wong’s Resource-Congruence Model (Wong, 1993; Wong et al., 2006) to assess whether clients have the sufficient resources and appropriate coping responses to cope with their predicaments.

- **Trent Attribution Profile** (TAP; Wong & Sproule, 1984; Wong, Watters, & Sproule, 1978). This is the only scale that measures internal locus of control and external locus of control as two separate dimensions.

**Meaning-Centered Intervention Strategies**

The following 5 intervention strategies are based on major theoretical concepts in MT. Within each strategy, there are several meaning-enhancing techniques.

1. **Cultivation of intrinsic self-worth.** To help clients become aware of the intrinsic value of every life is a cornerstone of MT. There are different techniques to explore intrinsic worth in the following domains: (a) **Relationships:** Ask clients about who they matter to most (e.g., their children, parents). (b) **Singularity:** Emphasize that they are singular, irreplaceable, and capable of making a unique contribution. (c) **Growth:** Demonstrate that a growth mindset can help one to learn and grow. (d) **Spirituality:** Explore their worldviews, core beliefs, ultimate concerns, ideals, and life goals.
   
   Spiritual activation techniques include: Activating personal meaning resources, identifying global beliefs in something bigger than oneself, searching for meaning and purpose, practicing prayer and meditation, and connecting one's life story to a meta-narrative.

   Other techniques to cultivate a positive self-identity include guided life review (Birren, 2001; Wong & Watt, 1991), expressive discursive writing (Pennebaker & Seagal, 1999; Sloan & Marx, 2004), and exercises to develop one's signature strengths (Peterson & Seligman, 2004). The mirror test can also be used by looking into a mirror and asking what you like about yourself and which aspects you want to change.

2. **The double-vision strategy.** The objective is to empower clients to look beyond their immediate concerns to the big picture. This strategy serves the purpose of normalizing a problem by making what is personal universal. It also serves to highlight areas that may require advocacy by the therapist on behalf of a client.

   **Techniques** to achieve a broader vision include: Taking a long-range view to provide a proper perspective for the present predicament, looking at personal problems from the perspective of universal problems (existential givens), looking at relevant macro forces such as global economic recession and systemic discrimination, stepping out of the situation and lifting up one's eyes to the sky and the horizon, and looking at the
problem from a historical perspective.

(3) The PURE intervention strategy (Wong, 2012b) provides a conceptual framework for goal setting and goal striving. It incorporates the major components and functions of meaning: Purpose, Understanding, Responsibility, and Enjoyment—the four components that define meaning in life (Wong, 2010b; Wong, 2012b). Numerous intervention skills can be used to achieve each of these components.

For example, the following techniques can be used to enhance clients’ awareness of their true purpose: (a) For each situation ask: ‘What purpose does this serve?’ If it doesn’t serve any useful function, then don’t proceed. (b) Reflect on the big questions: ‘What should I do with my life?’ ‘What really matters in life?’ (c) Behavioural experiments: Have you ever unfairly blamed your friend in order to get out of a difficult situation? Have you ever sacrificed your self-interest in order to help others or serve society? Have you found something for which you are willing to work hard and sacrifice?

The following are some techniques to activate awareness of responsibility:
(a) Ask yourself how your action will affect your loved ones and friends.
(b) Write down instances when you have broken a promise and let people down in the past month.
(c) Describe an instance in which you assumed personal responsibility at great cost.

It is interesting to note that the PURE strategy not only provides a conceptual framework for assessment and treatment, but also addresses the fundamental issues in meaningfulness, as proposed by Kauppinen (in press), a philosopher specializing in meaning. His Fitting Attitudes Analysis of Meaningfulness states: ‘S’s life is meaningful to the degree it is fitting for S to have agential pride, feelings of fulfilment, and confident hope, and for others to admire S’s life and be inspired or elevated by it’ (p 7). Agential pride comes from personal responsibility, feelings of fulfilment come from a sense of understanding and enjoyment, confident hope in receiving admiration comes from pursuing a worthwhile and significant purpose in serving the greater good.

(4) The ABCDE intervention strategy (Wong, 2012b) provides a conceptual framework for coping with all the negative aspects of life and existential anxieties. ABCDE stands for Acceptance, Belief, Commitment, Discovery, and Evaluation. Each component represents an important existential theme and meaning-oriented intervention. For example, acceptance is an important coping strategy in dealing with death and bereavement (Wong, 2008) and uncontrollable events (Wong, Reker, & Peacock, 2006). MT recognizes different levels of acceptance, from cognitive acceptance and emotional acceptance to integrative acceptance which incorporates a negative event with positive aspects of life.

(5) The dual-systems strategy. Together, PURE and ABCDE can be employed seamlessly, as symbolized by Yin-Yang. This dual process approach effectively integrates the negatives and positives that are inevitable in life, and negotiates a dialectical balance between opposing life forces (Wong, 2012d).

Other techniques and exercises
Socratic dialogue. This involves a series of questions designed to encourage clients to reflect and find answers inside themselves. It often revolves around basic existential questions such as: What is the point of all my striving? How do I know my true calling? What would make my life more meaningful and significant? What special mission or goal have all my experiences and gifts prepared me for? Often, such dialogue has a maimetic and dialectical aspect in exploring clients’ worldviews, cultural beliefs, and core values (Wong, in press, b). This method is ideal in drawing out what is innate and implicit within the human soul for what is right, noble, and significant. Viktor Frankl (1986) has used this method effectively in helping his patients to listen to their intuitive conscience, to discover enduring values, and to discover their new meaning in life.

Dereflexion. This involves redirecting clients’ attention from their problems and complaints to something positive. According to Frankl, dereflexion is based on the human capacities of self-distancing and self-transcendence. It involves asking questions such as: What would your life be like if you didn’t have this complaint? If everything went well, what would it look like? Is there anything in life that you would die for? In short, this technique helps clients see through their confusion and discover what really matters.

Perspective-taking. (a) Take the perspective of an unbiased observer and discover what is really going on (the reasonable person test), (b) Take the perspective of the person you are in conflict with (self vs. other), and (c) Take the perspective of your future ideal self (now vs. future)

Fast-forwarding techniques. Various questions are used to help clients see the consequences of their behaviour. (a) What will happen to you 5 years down the road, if you don’t make any changes in your life? (b) Deathbed test—imagining yourself on your deathbed, what would be your biggest regrets?

Daily exercise in the Fivefold Path to Positive Mental Health. This is designed to develop a balanced view of maintaining mental health.
1. Looking back for lessons learned in life.
2. Looking at present opportunities to learn and serve.
3. Looking forward to fulfilling future life goals.
4. Looking inward in mindful meditation.
5. Looking downward to extend a helping hand to those who need it.
Daily Self-Affirmation Mantras exercise: This is designed to cultivate and maintain a positive attitude.
- My life has intrinsic meaning and value.
- I am pursuing my mission with passion.
- I am more than enough for all the challenges that may come my way.
- I choose to stay positive throughout my day.

Gratitude Exercises serve as a spiritual exercise rather than an instrument for happiness:
- Identify 3 things you are thankful for in a recent setback or difficulty.
- Identify 3 things good about a significant person with whom you have a conflict.
- Express daily gratitude for the blessings you received that day.
- Reflect on what you do have and express gratitude for these gifts.

Conclusion
In sum, MT is a positive, integrative, and evidence-based existential therapy. It addresses all the traditional existential themes, but also makes full use of valid and reliable quantitative measures and the vast literature on meaning research. MT moves existential therapy closer to mainstream psychotherapy, without losing its existential philosophical roots.

My approach may raise some questions in the minds of traditional existential therapists, such as, ‘What happens to an open availability to whatever is on the client’s mind, with so many methods?’ or ‘What happens to the non-technical-based way of working of existential therapy?’.

My answer is that it does not restrict the practice of free-flowing existential-phenomenological therapists. What it does do is provide additional tools, both conceptual and technical, to assist existential therapists in their case conceptualization and assessment as advocated by Hoffman et al. (2014) and as I have argued for in this paper.

As a result of the recent positive psychology movement, meaning in life has moved to the centre stage of mainstream psychology. The present MT approach makes it possible to integrate new discoveries in meaning research with existential therapy (Wong, 2014).

MT is also a value-based and spiritually-oriented therapy. It continues Frankl’s efforts to humanize psychotherapy. It views each individual as an autonomous human being, seeking authenticity and personal significance against the backdrop of the bleak human condition. It advocates a person-centered and holistic approach of working with all dimensions of the person, but emphasizing the spiritual core as the heart and soul of psychotherapy. Thus, MT has much to commend itself to address mental health issues related to the crisis of meaning at both individual and societal levels.

As the most recent incarnation of Viktor Frankl’s logotherapy, MT represents a new evidence-based integrative existential therapy, which differs from Schneider’s (2007) existential-integrative therapy because of MT’s emphasis on employing meaning as a central organizing construct rather than using ontological or experiential context as the overarching framework.

MT differs from both the American version of existential-integrative therapy and the European version of phenomenological-existential therapy by virtue of its focus on meaning-seeking and meaning-making for a worthy life, rather than on existential anxieties. This positive emphasis is consistent not only with the old adage of Socrates, ‘The secret of change is to focus all of your energy, not on fighting the old, but building the new,’ but also with contemporary positive psychology research. I hope that MT’s positive and empirical emphasis will make existential therapy more accessible to mainstream cognitive behavioural psychotherapists.

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References


