

Adventures with Viktor Frankl and Advances in Logotherapy (AEPP01)

Chapter 7: Logotherapy Techniques

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Chapter 6 Recap

Chapter 6 focused on the hidden power of self-transcendence in terms of the seven principles and four hidden treasures of self-transcendence (see below).

<p>THE 7 PRINCIPLES OF SELF-TRANSCENDENCE ♦ DR. PAUL T. P. WONG</p> <p><i>The first five principles are proven strategies of overcoming and transcending suffering...</i></p> <ol style="list-style-type: none"> 1. Accept life as it is with gratitude. 2. Believe in creating a better future with help from Providence. 3. Commit to worthy goals and a life purpose. 4. Discover the hidden treasures by digging deeper. 5. Enjoy inner peace and harmony. 6. Love others as yourself. 7. Fear God and obey his commandments. <p><i>...The last two principles are the moral foundations of caring and doing no harm.</i></p>	<p>THE 4 HIDDEN TREASURES OF SELF-TRANSCENDENCE</p> <ol style="list-style-type: none"> 1. As a seed, we need to die to ourselves in order to rise again. 2. As a farmer, we need to have the existential wisdom to sow in the fertile soil of suffering. 3. As a soldier, we need to be willing to endure hardships and make the ultimate sacrifice. 4. As an athlete, we need to strive forward and upward to our highest calling. <p>♦ Dr. Paul T. P. Wong</p>
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The benefits of pursuing self-transcendence as a way of life are summarized in the following figure. In short, self-transcendence is essential for living a meaningful and spiritual life by rising about all constraints and reaching beyond ourselves to serve people we love or causes we care about.

The Best Possible Life Is A Deep Life

Here are the 7 reasons why:

1. At the deepest level, we are all the same: We all share the same DNA and the same human nature.
2. At the deepest level, all roots are connected because they share the same nutrients.
3. A tree can grow tall when it has deep roots.
4. Anything genuine or valuable is hidden below the surface.
5. You can have deep conversations or a deep relationship only with a deep person.
6. A deep person can see the light even in the darkest hour.
7. A deep life shines and flourishes in all circumstances.

◆Dr. Paul T. P. Wong

“Truth is a deep kindness that teaches us to be content in our everyday life and share with the people the same happiness.”

– Khalil Gibran

Abstract

Chapter 7 focuses on the How of meaning. More specifically, it is about how to apply logotherapy principles and techniques to meet the communal mental health needs and to heal individuals struggling with existential crises beyond the medical model. I first demonstrate how the basic principles of self-determination, self-distancing, and self-transcendence are the building blocks for mental health. Then I introduce the major logotherapy techniques such as Socratic Dialogue, Paradoxical Intention, and De-reflection, as well as Appealing and Attitude Modification to treat various kinds of mental disorders. I conclude that a faith-based and meaning-centered approach can contribute to positive transformation for both individuals and society.

Introduction

Many years ago, Viktor Frankl pointed out that the world was suffering from the mass neurotic triad of “aggression, addiction, and depression,” which could be traced to the “existential vacuum” (i.e., the perception that one’s life appeared to be meaningless). This existential vacuum is still a widespread phenomenon in the 21st Century.

Just witness the increasing incidents of mass killings, random violence, and inter-racial conflicts and hate crimes. Why is there so much hatred and anger that erupts into violence?

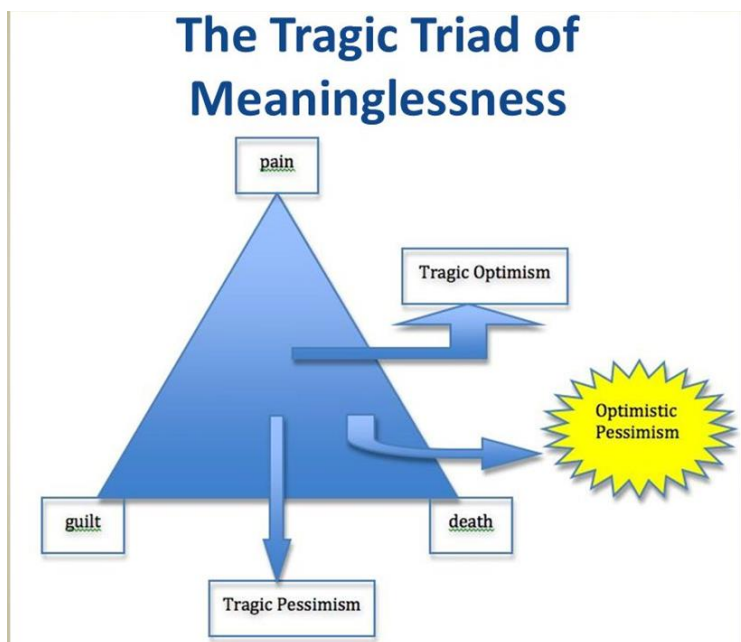
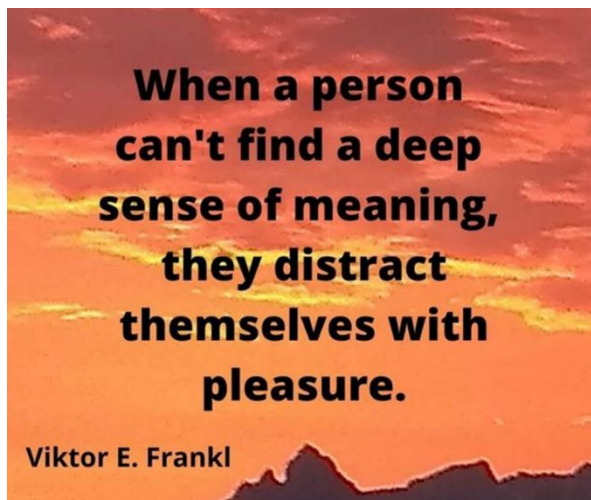
What account for the increase of substance abuse and addiction (National Center for Drug Abuse Statistics, 2023)? What contribute to the opioids overdose epidemic (Centers for Disease Control and Prevention, 2023)? Is addiction driven by the need to find escape from a painful existence? Is it primarily motivated by the desires for happiness in a meaningless life?

Why are young people (15-24) more affected by mental illness and/or addiction than any other age group? Is COVID-19 the main trigger of an increase in depression and anxiety (World Health Organization, 2022)? Is financial stress a determinant of depression (Guan et al., 2022)?

We have already learned the mental health benefits of quest for meaning (Wong, 2012). “A strong will to meaning promotes human health, both physically and mentally, and prolongs, as well as preserves, life” (Graber, 2004, p. 65) Likewise, Lukas (2015) points out logotherapy’s unique contribution of providing positive meaning and healing in times of suffering.

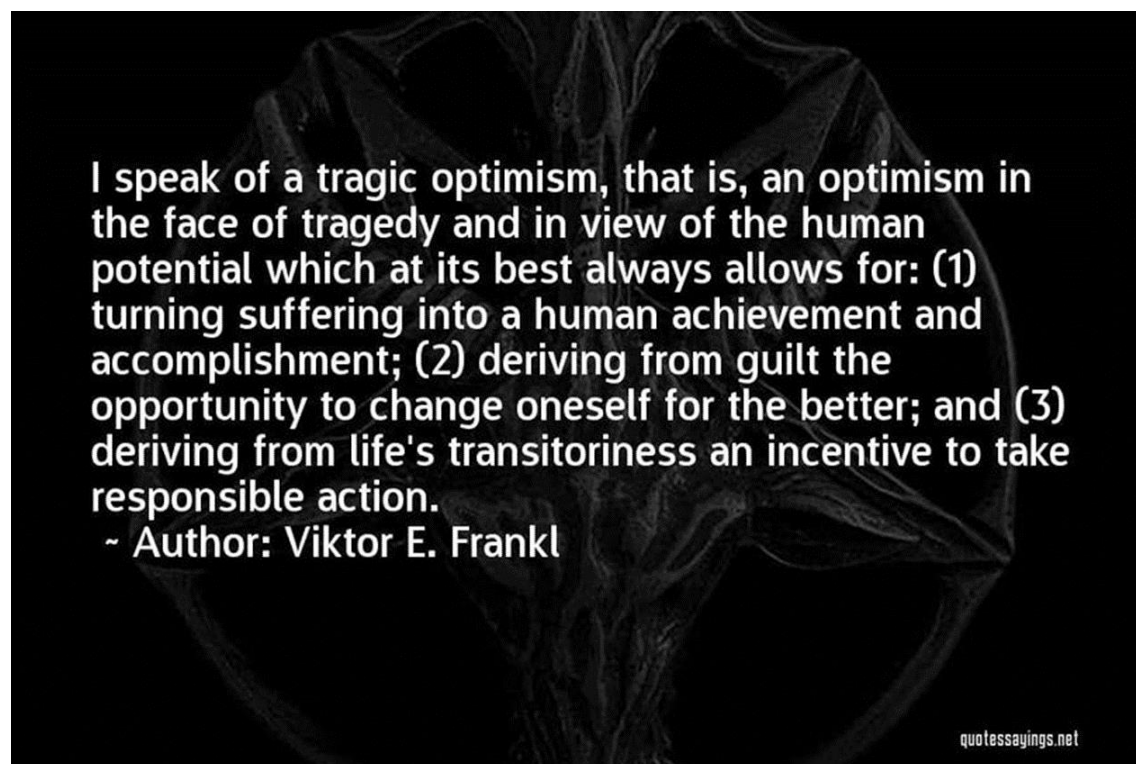
At a deeper level, all people suffer from the tragic triad of pain, guilt and death. No one is immune from these three major sources of suffering. We have already learned from previous chapters that pain and death are inevitable.

Psychologically, guilt is also inevitable because all of us have violated our conscience or our own standard of morality. Who has not done things that they are ashamed of? Who does not feel guilty for having hurt a loved one?



No medicine can cure a broken heart or the deep pain of grieving the death of a loved one. No science can find a solution to the tragic triad. However, meaning provides new grounds for hope as summarized by the following quote from Frankl.

Basically, pain can become an opportunity for human achievement; guilt can be an opportunity for reform or rebirth, and death can be a trigger for taking responsibility to make the best use of our time on earth. More recently, my colleagues and I have proposed more specific mechanisms to transform hopelessness and tragic pessimism to tragic optimism (Leung et al., 2021; Wong, 2009).



Here is an important caveat – there is a breaking point for everyone, no matter how strong one's willpower or one's faith in God is. I have both experimental evidence and person experience that demonstrates this point (Wong, 2021). About 10 years ago, when I had to endure excruciating pain all night from very painful and intrusive procedures, I finally lost my mind (had a nervous breakdown) when they shipped me to the operation room. That was the result of about 2 days of enduring pain without proper sleep and any food.

I had no idea what I did during my mental breakdown, but after the surgery, I was told by the doctor that I was psychiatric ill. I was given the basic mental status test during every nursing shift during my entire stay in the hospital. In spite of my protest and showing the doctors that I had a sound mind and was able to write publishable papers, they still considered me mentally ill.

I was known to all my family and friends as a very tough guy, with a high threshold of endurance, but I reached my breaking point during my hospitalization. But I don't feel any stigma or feel any shame in admitting my pain-induced psychiatric illness.

In fact, according to Soper's brain-pain theory (Soper 2020; Wong, 2022), mental illness is human beings' last line of defence or last defence mechanism to prevent us from committing suicide. When one's mental pain or physical pain is no longer bearable, one may develop

dissociative amnesia, illusions, or hear voices in order to make life more tolerable in order to prevent suicide.

A related caveat is that resilience training does not mean that one can turn every trauma into achievement. My own experience certainly indicates that even a resilience expert can become mentally ill under certain conditions. But it does mean that one with a resilient mindset (Arslan & Wong, 2023) is better equipped to survive and flourish after any trauma.

Frankl's Relevance for Mental Health in the 21st Century

Even though the term *neurosis* has been replaced by numerous disorders in to APA's *Diagnostic and Statistics Manual* (DSM), Frankl's concepts and diagnosis are still relevant today. It is helpful to recognize that some common disorders (e.g., aggression, addiction and depression) are related to "existential vacuum" and they can be treated by meaning-centered therapy.

Writing in *The New York Times*, Harris and Ransom (2023) assert that many people that need psychotherapy cannot get it because of various barriers, such as affordability and availability. Meaning therapy can help fill the void because it can be practiced in the community, with some training in logotherapy and without a medical degree or a PhD in psychology, since it makes use of the innate capacities in all people, such as self-determination, self-distancing, and self-transcendence. Recently, I proposed the need to re-think mental health beyond the medical model so that we can involve the whole community and make use of innate human capacities for healing (Wong & Laird, 2023).

For example, one can resort to the defiant power of the human spirit for self-determination – choosing the will to meaning. Without taking personal responsibility to make positive changes, one will remain trapped in one's miseries. Self-distancing enables the client to separate themselves from their problems in order to provide some space or distance so that they can have a better understanding of what troubles them; this is similar to Michael White's (2007) concept of externalization in narrative therapy.



The most important general principle is self-transcendence; all people have the potential to overcome or rise above their problems through courage, faith and finding a sense of meaning for living. Self-transcendence free us from self-absorption so that we can have time and energy to really care for others. Mental health depends on learning how to love and receive love. Most of the problems we face are due to broken relationships or superficial relationships.

The above quote emphasizes the need to get to know another human being as a unique individual with his or her hidden wounds and unfulfilled dreams. Have you ever had a deep conversation to get to know the innermost core of the person? Do you speak the truth in love (Ephesian 4:15)? Have you shown kindness and compassion to another person with a pure heart and good conscience (1 Timothy 5)? Do you use your gifts and talents to serve others (1 Peter 4:10)? These practices of loving others are intended for all people, including people with a different sexual orientation (i.e. LGBTQ) or from a different religion (i.e., Muslim, Buddhism).

More importantly, there is also the vertical dimension of self-transcendence, which connects us with God, the Creator of the universe and the source of all beings. When we access God's grace by faith, then we will have the divine help to love ourselves and love others, resulting in a positive spiritual as depicted by the following graph (from Editors of St. Mary's Bellingham Spirituality, n.d.).



General vs. Special Existential Analysis

We have already covered *general existential analysis* that addresses human beings' general need to assume personal responsibility in their search for meaning and spirituality. In this chapter,

we will focus on *special existential analysis*, which addresses the need of treating individuals with various disorders with only an existential etiology.

Here is a word of caution: In some cases, meaning therapy is an adjunct to medication or other medical treatment for any brain disease or physical illnesses. But in cases without any physiological or neurological etiology, logotherapy itself can be effective with individuals, couples (Schulenberg et al., 2010), or groups (van der Spek et al., 2017; Wong, 2016a).

Knowing or embracing your true self is essential for mental health. That is why meaning therapy begins with reflection on one's essence and becoming aware of both the hidden image of God and the dark Shadow in all of us. This awakening is an important part of the spiritual growth cycle.

Here are some exercises that help people know and accept themselves as the foundation of mental health:

- 1) Do you know who you really are? Write a brief autobiography about what you have gone through and what makes you tick.
- 2) Keeping in mind Frankl's challenge of asking yourself what life demands of you instead of what you demand from life, write a concise mission statement for your career or for your life.
- 3) What is one realistic goal that you want to accomplish that can make you feel that your life matters?
- 4) What was the most meaningful moments in your life? Why?
- 5) Who has hurt you most? Have you found enough space in your heart to forgive them?
- 6) Is there anything or anyone in this life which you value more than your own life?
- 7) What is your worst enemy? Have you found a way to slay the dragon?



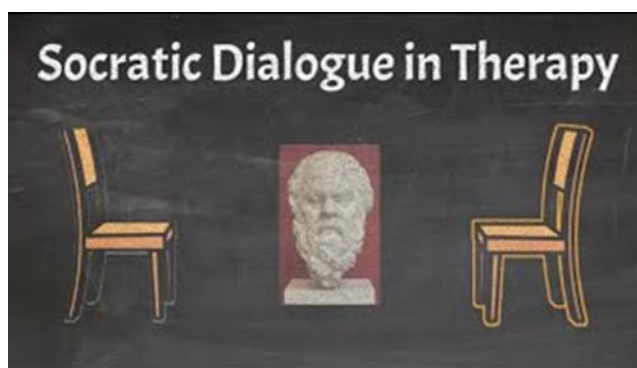
Logotherapy Techniques

Logotherapy techniques are built on the general principles of logotherapy, which are based on the innate capacities of all people. These principles provide the building blocks for mental health as I have just discussed. In this section, I will focus on specific techniques we use in special existential analysis.

When we look back to our own lives, we will realize that we all have gone through painful traumas such as the death of a pet, the death of a loved one, or rejection by someone we were obsessed with. Time heals, but some traumas may remain raw and open even after decades because they have never been resolved or treated by mental health professionals. Yes, meaning contributes to healing (for an example, see Harry & van Niekerk, 2023), but professional help may be needed in some severe cases. Here are the major techniques used in logotherapy as a medical ministry or as a treatment for existentially-based mental disorders (Wong, 2002).

The Socratic Dialogue

In *Socratic dialogue*, the therapist facilitates the client's discovery of meaning, freedom, and responsibility by asking *Why* questions to challenge clients to find answers by consulting their own reasoning, conscience and inner resources. This technique is based on the assumption that clients benefit more from finding their own solutions than being given the answer without any struggle. Often, silence is needed for the clients to reflect on their own lives and on the questions from their therapist.



Socratic dialogue serves the general purpose of drawing out from the clients what they already know intuitively. The assumption is that deep inside our spiritual core, we know what is meaningful and what we are meant to be. However, this technique works only when the therapist has already built up a safe space of trust and safety and the client knows that the therapist really cares about her and wants her to live a happier life.

Another important component for healing is belief or trust. Through Socratic dialogue with a caring and loving attitude, we can help patients believe they are safe to share their deepest wounds and that they can believe that healing and recovery are attainable if they are committed to the process and keep faith.



Six Types of Socratic Questions

1. Questions for clarification
2. Questions that probe assumptions
3. Questions that probe reasons and evidence
4. Questions about Viewpoints and Perspectives
5. Questions that probe implications and consequences
6. Questions about the question

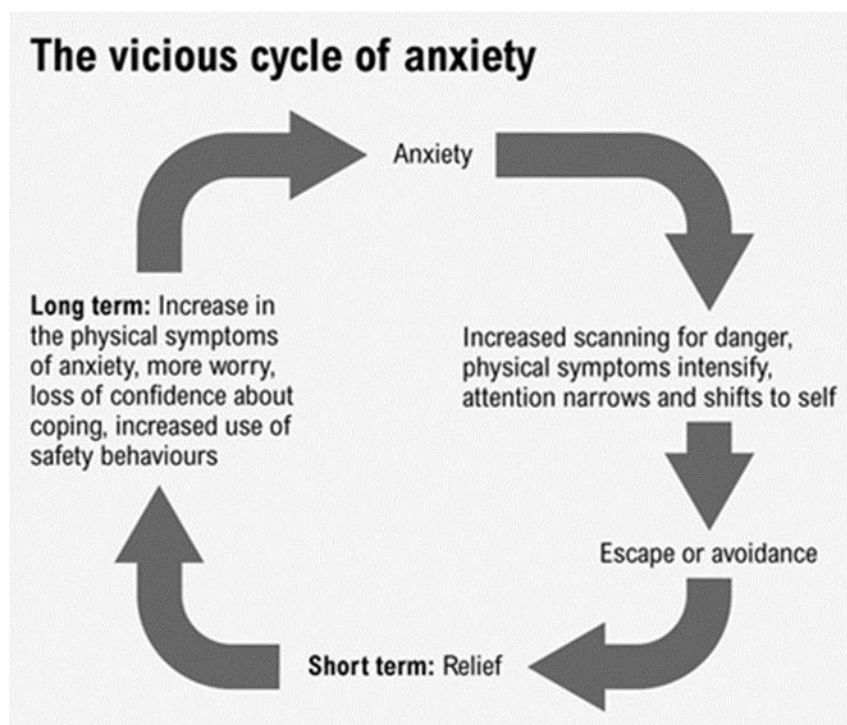
Eight Examples of Socratic Questions in Logotherapy

- 1) Why do you feel anxious when everything seems to go well in your life? What are your concerns?
- 2) Is it possible that the end of a bad relationship may be the beginning of something new? What could that be?
- 3) What is the evidence that you are useless? Can you tell me anything that you have done that gave you great satisfaction?
- 4) Have you thought about how much suffering you will cause your loved ones if you try to end your life? Does suicide solve your problem?
- 5) If no one has ever cared about you, how did you grow up to be a healthy young man?
- 6) How does it help you by thinking about the worst case scenarios only? What will be a more helpful attitude towards life?
- 7) What do you value most in this life? Why?
- 8) What do you think is your role in this world? Why?

This line of questioning sounds like cognitive behavioural therapy (CBT), but they are more oriented towards beliefs, values, and attitudes (see the integration between CBT and logotherapy in Ameli, 2016 and Wong, 1997).

Paradoxical Intention

Frankl describes *paradoxical intention* as “The patient is encouraged to do, or to wish to happen, the very things he fears (the former applying to the phobic patient, the latter to the obsessive-compulsive).” This technique builds on the human capacity for self-detachment to break the vicious cycle. Self-detachment enables the patient to adopt a new attitude, and to stand back and laugh at the situation or self.



Individuals suffering from anxiety have “fearful expectations” that something bad might occur, and this “anticipatory anxiety” in turn brings about what they fear. Thus “fear of fear” creates a “vicious cycle” (see the following image from Center for Clinical Interventions, n.d.). The most common reaction to “fear of fear” is to avoid or escape from fear, which may produce temporary relief, thus, reinforcing excessive avoidance.

Paradoxical intention typically begins with self-detachment (often after invitation and persuasion). The second step is to ask the patient to develop a new attitude of not fearing but welcoming the symptoms, resulting in a reduction of the symptom.

In the case of obsessive–compulsive disorder, the more an individual fights against the obsessions or compulsions, the stronger they become. Again, a vicious cycle is created. To break this vicious cycle, the patient with certain compulsive disorder may be asked to indulge in it to the point of being ludicrous or laughable.

Dereflection

Frankl developed *dereflection* to counteract hyper-intention (trying too hard), such as trying very hard to fall asleep or trying too hard to pursue success. It is also useful to correct hyper-reflection, which involves overthinking or excessively and obsessively going over every detail of what one has done wrong in the case of self-blame.

This technique is built on the human capacity of self-distancing and self-transcendence. The clients are asked to redirect their attention away from the problems to more positive aspects of their lives. For example, instead of worrying about not being able to fall asleep, the client may be asked to use the time to read something relaxing or meditate on scripture.

Modification of Attitudes

Logotherapy emphasizes the importance of attitude towards life because our worldviews and life-orientation may have far more influence on how we live our lives than our cognitions and behaviours in specific situations.

Rather than only focusing on what is wrong with us, Frankl focuses on what is right with us, what is good about us, and what potential we have in spite of our limitations and failures.

Instead of only focusing on what is wrong with the world or the circumstances, he emphasizes our capacity to respond to our meaning-potential in each situation, and the ultimate meaning of life through faith in God.

This technique can also be used in coping with suffering related to setbacks, misfortunes, or illness. Generally, the emphasis is on reframing attitudes from negative to positive. For example, the client may be asked: “Is there anything positive about the situation?” or “What freedom is still available to you in this situation?”

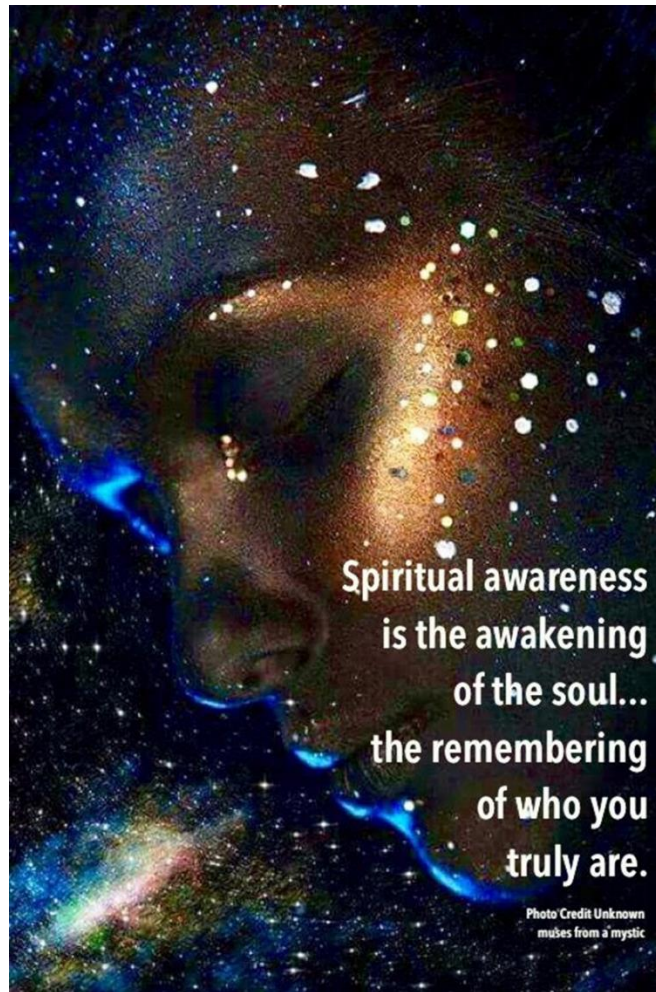
Logotherapy is essentially an effective form of motivational counselling. Its emphasis on the quest for meaning as a primary motive provides the common ground for a conversation on reasons for living. Its appeal to the defiant human spirit provides the impetus for people to endure the pain and overcome obstacles. Its focus on human responsibility can effectively reorient clients from self-centered pursuit to something larger than themselves. When all is lost, when one is at the end of the rope, logotherapy opens up new vistas of hope and empowers clients to move forward (Wong, 2010).

The Appealing Technique

I have already provided a detailed discussion of the *appealing technique* (Wong, 2002). Basically, the therapist directly appeals to the client’s defiant power of the human spirit to change for the better, regardless of circumstances. This appeal is based on having confidence in the client’s innate dignity, freedom, responsibility, and potential for positive change. Here is an example of appealing a client to take a more positive attitude towards cancer:

“Frankl claims that ‘Logotherapy is neither teaching nor preaching. It is far removed from logical reasoning as it is from moral exhortation.’ However, appealing often involves exhortation on the value of taking a heroic stand against suffering. For example, a nurse suffered from an inoperable tumor and experienced despair because of her incapacity to work. Frankl tried to appeal to her sense of pride and moral obligation to her patients: ‘I tried to explain to her that to work eight or ten hours per day is no great thing—many people can do that. But to be as eager to work as, and so incapable of work, and yet not be despair—that would be as achievement few could attain.’ And then I asked her: ‘Are you not being unfair to all those sick people to whom you have dedicated your life; are you not being unfair to act now as if the life of an invalid were without meaning? If you behave as if the meaning of our life consisted in being able to work so many hours a day, you take away from all sick people the right to live and the justification for their existence.’” (Wong, 2002)

Conclusion

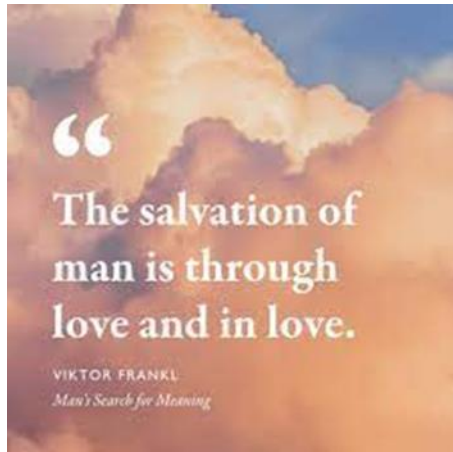


The importance of religion and spirituality in mental health has gained widespread acceptance in the therapeutic community (Weber & Pargament, 2014) and by today's society (The Health News Team, 2022). Frankl was the first psychiatrist to make spirituality the cornerstone of his approach to psychotherapy.

More specifically, spiritual activation is the unique key to healing in logotherapy and meaning therapy (Wong, 2016b). This spiritual activation may be summed up in three steps:

- 1) Help clients become spiritually aware of who they truly are and why they need to embrace and transform their dark side in order to find authentic happiness.
- 2) Appeal to the spiritual dimension of human existence as the source of freedom, responsibility, hope, dignity, and meaning by building the foundation of mental health based on self-determination, self-distancing and self-transcendence.
- 3) Build a safe and trusting therapeutic relationship with appropriate techniques such as Socratic dialogue and paradoxical intention.

Together, they three steps contribute to the upward spiral of transformation and personal growth. This can happen only when we are willing to invest time and energy in cultivating deep and meaningful relationships through active listening and making the necessary personal sacrifices to serve others. Love is the motivation and faith make it possible. The end result is hope, joy and peace which are desperately needed in today's society.



I want to conclude this chapter with another Frankl quote:



References

- Ameli, M. (2016). Integrating Logotherapy with Cognitive Behavior Therapy: A worth challenge. In A. Batthyány (Ed.), *Logotherapy and Existential Analysis: Proceedings of the Viktor Frankl Institute Vienna* (Vol 1, pp. 197-217). Springer International Publishing. DOI 10.1007/978-3-319-29424-7_18
- Arslan, G., & Wong, P. T. P. (2023). Embracing life's challenges: Developing a tool for assessing resilient mindset in second wave positive psychology. *Journal of Happiness and Health*, 4(1), 1-10. <https://doi.org/10.47602/johah.v4i1.53>
- Center for Clinical Interventions. (n.d.). Anxiety – reversing the vicious cycle. *Government of Western Australia*. https://www.healthywa.wa.gov.au/Articles/A_E/Anxiety-reversing-the-vicious-cycle
- Centers for Disease Control and Prevention. (2023, August 8). *Understanding the opioid overdose epidemic*. <https://www.cdc.gov/opioids/basics/epidemic.html>
- Editors of St. Mary's Belligen Spirituality. (n.d.). *The cycle of spiritual growth*. <https://stmarysbellingenspirituality.weebly.com/the-cycle-of-spiritual-growth.html>
- Graber, A.V. (2004). *Viktor Frankl's Logotherapy: Method of Choice in Ecumenical Pastoral Psychology* (2nd ed.). Wyndham Hall Press.
- Guan, N., Guariglia, A., Moore, P., Xu, F., & Al-Janabi, H. (2022). Financial stress and depression in adults: A systematic review. *PloS one*, 17(2), e0264041. <https://doi.org/10.1371/journal.pone.0264041>
- Harris, A. J., & Ransom, J. (2023, November 21). How New York has failed mentally ill homeless people. *The New York Times*. <https://www.nytimes.com/2023/11/20/nyregion/nyc-mental-illness-breakdowns.html/>
- Harry, T. T. & van Niekerk, R. (2023). Searching for meaning in the life of Ellen Johnson-Sirleaf: A call to meaningful responses to tragedies. *Journal for Person-Oriented Research*, 9(2), 93-103. <https://doi.org/10.17505/jpor.2023.25815>
- Leung, M. M., Arslan, G., & Wong, P. T. P. (2021). Tragic optimism as a buffer against COVID-19 suffering and the psychometric properties of a brief version of the life attitudes scale (LAS-B). *Frontiers in Psychology*, 12, 646843. <https://doi.org/10.3389/fpsyg.2021.646843>
- Lukas, E. (2015). *The therapist and the soul: From fate to freedom*. Purpose Research.
- National Center for Drug Abuse Statistics. (2023). *Drug abuse statistics*. <https://drugabusestatistics.org/>
- Schulenberg, S. E., Schnetzer, L. W., Winters, M. R., & Hutzell, R. R. (2010). Meaning-centered couples therapy: Logotherapy and intimate relationships. *Journal of Contemporary Psychotherapy: On the Cutting Edge of Modern Developments in Psychotherapy*, 40(2), 95–102. <https://doi.org/10.1007/s10879-009-9134-4>
- Soper, C. A. (2020). *The evolution of life worth living: Why we choose to live*. C. A. Soper.
- The Health News Team. (2022, May 16). How spirituality can benefit your mental health. *SHARP*. <https://www.sharp.com/health-news/how-spirituality-can-benefit-your-mental-health>
- van der Spek, N., Vos, J., van Uden-Kraan, C. F., Breitbart, W., Cuijpers, P., Holtmaat, K., Witte, B. I., Tollenaar, R. A. E. M., & Verdonck-de Leeuw, I. M. (2017). Efficacy of meaning-centered group psychotherapy for cancer survivors: a randomized controlled trial. *Psychological medicine*, 47(11), 1990–2001. <https://doi.org/10.1017/S0033291717000447>

- Weber, S. R., & Pargament, K. I. (2014). The role of religion and spirituality in mental health. *Current opinion in psychiatry*, 27(5), 358–363.
<https://doi.org/10.1097/YCO.0000000000000080>
- White, M. (2007). *Maps of narrative practice*. Norton.
- Wong, P. T. P. (1997). Meaning-centered counseling: A cognitive-behavioral approach to logotherapy. *The International Forum for Logotherapy*, 20(2), 85-94.
- Wong, P. T. P. (2002). Logotherapy. In G. Zimmer (Ed.), *Encyclopedia of psychotherapy* (pp. 107-113). Academic Press.
- Wong, P. T. P. (2009). Viktor Frankl: Prophet of hope for the 21st century. In A. Batthyany & J. Levinson (Eds.), *Existential psychotherapy of meaning: Handbook of logotherapy and existential analysis*. Tucker & Theisen.
- Wong, P. T. P. (2010). A brief manual for meaning-centered counseling (MCC): Chapter two: a brief review of Logotherapy. *International Network on Personal Meaning*.
https://www.meaning.ca/archives/archive/art_MCC_manual_chp_2_P_Wong.html
- Wong, P. T. P. (Ed.). (2012). *The human quest for meaning: Theories, research, and applications* (2nd ed.). New York, NY: Routledge.
- Wong, P. T. P. (2016a). [Meaning centered positive group intervention](#). In P. Russo-Netzer, S. Schulenberg, & A. Batthyány (Eds.), *Clinical perspectives on meaning: Positive and existential psychotherapy* (pp. 423-445). Springer.
- Wong, P. T. P. (2016b). [Integrative meaning therapy: From logotherapy to existential positive interventions](#). In P. Russo-Netzer, S. E. Schulenberg, & A. Batthyány (Eds.), *Clinical perspectives on meaning: Positive and existential psychotherapy* (pp. 323-342). New York, NY: Springer.
- Wong, P. T. P. (2021). Positive psychology goes to hell and back.
<http://www.drpaulwong.com/positive-psychology-goes-to-hell-and-back/>
- Wong, P. T. P. (2022). Review of The Evolution of Life Worth Living: Why we choose to live. *International Journal of Wellbeing*, 12(3), 101-112.
<https://doi.org/10.5502/ijw.v12i3.2395>
- Wong, P. T. P., & Laird, D. (2023). Varieties of suffering in clinical setting: Re-envisioning mental health beyond the medical model. *Frontiers in Psychology*, 14.
<https://doi.org/10.3389/fpsyg.2023.1155845>
- World Health Organization. (2022, March 2). *COVID-19 pandemic triggers 25% increase in prevalence of anxiety and depression worldwide*. <https://www.who.int/news/item/02-03-2022-covid-19-pandemic-triggers-25-increase-in-prevalence-of-anxiety-and-depression-worldwide>