Philosophy as therapy

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PHILOSOPHY AS THERAPY

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The Importance of Philosophical Counselling

Kierkegaard’s concept of the sickness of the soul (the self) could, according to a philosopher, present itself as depression, impartiality, or lack of meaning and ultimately, happiness within life. Philosophy seeks the truth and provides the means to re-establish the Greek concept of euthymia\(^1\) (stable state of mind). The individual’s existential anxiety or the distress from searching for meaning within society can be reduced through philosophical elements within counselling. When philosophical counselling is carried out appropriately, the individual can learn to be in the world; to be fully present in the here and now. In Sickness Unto Death, Søren Kierkegaard provides an anthology of the self and focuses on the psychological experience of despair in regards to the individual. Kierkegaard claims that the majority of people in the world are ignorant of their state of despair due to the temporal distractions of modern society. Though Kierkegaard does not provide a structured solution to removing oneself from despair, he does provide the broad statement that “the cure is simply to die, to die to the world.”\(^2\) Essentially, Kierkegaard is suggesting that the individual removes herself from the temporal world in order to focus on the eternal and take part in the process of becoming her true self.

Philosophical counsellors incorporate Kierkegaard’s concept of moving beyond the aesthetic life to develop a sense of self-awareness. Though philosophical counsellors (Kierkegaard’s equivalent to the physician of souls) guide and encourage the individual to develop this inwardness, many philosophical counsellors are hesitant to call philosophical counselling ‘therapy.’ This is because the philosophical counsellor, unlike her psychotherapeutic

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counterpart, does not diagnose her clients according to some ready-made normative ideals about mental health or self-understanding. Neither does the counsellor offer the sort of therapy that expects the client to passively receive treatment. Just as Kierkegaard’s writings force the reader to take part in deliberate contemplation, philosophical counselling utilizes the Socratic Method that forces the “individual’s own thought to come forward” and has her make the ultimate decision to become what the philosophical counsellor calls *self-actualization* (a term derived from Kierkegaard’s literature). As a result, philosophical counselling is therapeutic in its effects: when the individual becomes inwardly motivated to become a “concrete self.”

*What is Philosophy?*

Some experts, such as Robert Walsh, suggest that there is no such thing as *philosophy* in regards to it being a concretely defined body of knowledge. Instead, many scholars make the distinction between the academic notion of *philosophism* and the “art of living” known as philosophy. Whereas philosophism pertains to obtaining knowledge of philosophy (the concrete), the traditional concept of philosophy is a “way or a path” and consists of the individual taking part in what Heidegger refers to as the “loving, desiring, and seeking of wisdom (*philosophia*)”

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7 David Walsh, “Philosophical Counseling Practice,” *Janus Head*, 8(2) (2005):497

8 Ibid.
More than two thousand years ago, Epicurus characterized philosophy as “therapy of the soul." He maintained that the arguments made by a philosopher are empty if they do not relieve any human suffering. Similarly, modern scholars such as Martin Buber, Alex Howard, A. Hoogendijk, Schlomit Schuster, and Robert Walsh also consider day-to-day living to be made of the continuous interactions with other individuals within society. And while a level of personal inwardness is necessary for the individual to obtain, Walsh asserts that the living practice of philosophy is inherently one characterized by the loving and intellectual interaction with other. The lover of wisdom (philosopher) does not travel along the philosophical pathway unaccompanied. Instead, the lover of wisdom has a desire to seek and maintain openness with others. As a result, any interaction that is healing in some way and that helps the individual move away from “needless suffering and toward greater happiness” is considered by these experts to be therapeutic. This translates into the professional philosophical counselling environment by establishing the counsellor as being a fellow philosopher along the path in order to guide client as the client begins her process pursuing the truth.

*Modern Society’s Lack of Philosophy*

Modern society has squandered the average individual’s desire to seek the truth. The availability of instantaneous gratification has created the illusion of obtaining satisfaction for the individual’s every whim and, therefore, has resulted in a trend of temporal happiness. As a

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10 David Walsh, “Philosophical Counseling Practice,” 497.
result, philosophy has been “locked in an ivory tower”\textsuperscript{11} and has been disconnected from the skill-set of those “ordinary people trying to make sense of their lives.”\textsuperscript{12} Centuries of poetic living has caused society and, in turn, the individual to disintegrate “into a disenchainting, lifeless individual and amoral”\textsuperscript{13} consumer in which despair continues to flourish within its ignorant host. Poetic living consists of living in a manner that enshrines esthetic values rather than encouraging the individual to seek the ethical. And though philosophers do not usually endorse the idea of encouraging the “romantic spirit,”\textsuperscript{14} (also known as the Kierkegaardian poet), philosopher Alex Howard suggests that lyrical writing such as that found in Kierkegaard’s \textit{The Sickness Unto Death} could be incorporated in order to awaken the society’s and the individual’s spiritual awareness.

Even though modern society is privy to the scientific workings of the human mind and body, its citizens continue to “pamper, amuse, and empower [them]selves with gadgetry.”\textsuperscript{15} Modern society is still no better off in obtaining true happiness and has instead settled for the concrete materialistic or self-serving elements of the world in order to comfort and delude themselves into believing that happiness has been and still is upon them. This trend has raised the following questions: where is society’s “ability or willingness to co-operate, communicate, give and receive support?”\textsuperscript{16} Where has the social connection gone? And has the individual’s narcissistic


\textsuperscript{12} Ibid.

\textsuperscript{13} Ibid., 416.

\textsuperscript{14} Ibid.

\textsuperscript{15} Ibid., 412.

\textsuperscript{16} Ibid.
nature been so inflated over the years that the introspective awareness that is the pre-requisite for the act of philosophy has been squandered? How can the human race claim to be “more wise, compassionate or sensitive”\textsuperscript{17} or to be taking part in any form of ethical and spiritual development?

To begin exploring these questions, Howard suggests that “the philosophy [that an individual] adopts provides the building blocks, and the underlying organisation, to the very manner in which [an individual] perceive[s] and reflect[s].”\textsuperscript{18} As such, counselling must also partake in the continuous process of locating itself “intellectually, ethically, and culturally; and consider how it got there”\textsuperscript{19} in order to be used effectively, for the good of the client (the individual) and the greater society. Howard notes that there is little literature that successfully relates “philosophical ideas to the concerns of counsellors or her clients.”\textsuperscript{20} This is where the existentialist teachings of Kierkegaard are beneficial and, as some would argue, crucial in forming philosophically-accurate guidelines for facilitating the process of introspection (inwardness) and identifying the despair that is so prevalent in modern society.

\textit{The Modes of Being}

Philosophy is the key component in mediation between psychology (the individual’s mental or spiritual state) and the external world, otherwise known as the materialistic, temporal world. The average individual is living her day-to-day life in a mental mindset that will be referred to as the baseline. The baseline encompasses what Kierkegaard refers to as being “unaware of being

\begin{flushleft}
\textsuperscript{17} Ibid., 413.
\textsuperscript{18} Ibid., 416.
\textsuperscript{19} Ibid.
\textsuperscript{20} Ibid.
\end{flushleft}
defined as spirit”\textsuperscript{21} or rather, ignorant of being in despair. The individual living within the baseline has found a level of materialistic security and illusory contentment with her so-called free and happy life. This individual within the base mental mindset is trapped into believing that her “self is healthy and free from despair”\textsuperscript{22} but it is only the type of despair that the individual can understand within the temporal realm of society: despair as resulting as the inability to obtain what society refers to as happiness. The baseline is often a product of the values that society has advertised. Unfortunately, modern society’s narcissism, consumerism, and its obsession with reaping the temporal rewards has resulted in the loss of the individual within society and structured the individual’s base mindset so that it is fixated on the temporal while remaining ignorant of the despair that lies in her heart. This baseline restricts the process of introspection and taking part in the process of self-actualization. It is necessary for an individual to have an identity, meaning, purpose, and direction in her life. Ideally (in the philosophical realm), these components would undergo continuous formation and reformation thereby raising “new questions and doubts.”\textsuperscript{23} But the philosophical truth is that happiness is illusory and society’s individuals continue to delude themselves into thinking that they are seeking happiness, but they are merely distancing themselves from despair.

When the individual becomes overwhelmed with events that have occurred within the physical world, it impacts her psychological state in a significant manner. This creates turmoil within the individual and leads her to desperately seek something base mind set (the baseline). This ‘something’ is indicative of society having socialized its citizens to desire quick solutions

\textsuperscript{21} Søren Kierkegaard, \textit{The Sickness Unto Death}, XI 139.

\textsuperscript{22} Ibid., XI 144.

\textsuperscript{23} Howard, 411.
that parallel a shopper on a rampage in the consumerist world. The individual seeks an automatic solution in an easily accessible mode. The majority of individuals in a despairing state would typically seek one of two paths of what they would believe to be therapeutic treatment: problem-focused counselling or drug therapy.

On a rare occasion, the individual becomes conscious of the deception of “life’s [so-called] joys or its sorrows”\(^{24}\) and is able to see the possibility of ascending beyond the baseline to what will be referred to as the *intellectual mode*. The intellectual mode is the mental state where the individual has gained an inkling of awareness about her eternal self. This is the pre-requisite of taking part in the philosophical journey. Once the individual has gained this awareness can begin seeking the *truth* and developing in an authentic manner. The individual that has gained this entry-level of inwardness is the type of individual who is the perfect candidate for philosophical counselling. Unfortunately, “most [individuals] live without ever becoming conscious of being destined as spirit”\(^{25}\) and remain ignorant about their state of continual despair due to societies cultivation of the baseline.

Following the philosophical pathway allows the individual to explore questions about her identity, meaning, and purpose in regards to establishing her authentic self amongst the polarities of the physical and psychical world.\(^{26}\) Philosophy’s foundational questions ask “how we make sense of our existence, how we are to understand, and achieve ‘happiness’?”\(^{27}\) These questions, if contemplated about appropriately, allow an individual to tap into her intellectual mode of *being* rather than floating along her temporal baseline that has been cultivated by society. For

\(^{24}\) Søren Kierkegaard, *The Sickness Unto Death*, XI 140.

\(^{25}\) Ibid.

\(^{26}\) Alex Howard, “What can Philosophy Offer Counselling and Psychotherapy?” 411.

\(^{27}\) Ibid.
those that address questions such as these when only in distress, the need for answers are “charged with particular, practical urgency.” 28 Unfortunately, these answers are usually sought out when an individual has fallen below her temporal baseline into the survival mode where she is overwhelmed by despair (though still ignorant about this despair) because even a level of false happiness is not achieved. When answers are sought by individuals who are in survival mode the answers are rarely thought to be the products of true philosophy. This is because society has discouraged the individual from seeking the truth and cultivated a desire within the individual for the temporal elements of the world. As a result, philosophy has become a “repressed” 29 society instilling the necessity for the individual to follow the baseline and implementing the myth of achievable happiness. According to academics and practitioners such as Walsh, Howard, and Schuster, the pathway of true philosophy can only be carried out by an individual who is ‘sane’ or rather, has started to become aware of her true level of despair (ascended to the intellectual mode) and seeks to become an authentic thinker. Even when this is achieved, it must be noted that when true philosophy is carried out, even by an individual such as Socrates, it is never finished; “it is what you end up doing if you keep on asking questions about the basis of previous answers.” 30

Who is the Physician that Kierkegaard speaks of?

Kierkegaard’s physician “has a defined and developed conception of what it is to be healthy and ascertains a man’s condition accordingly.” 31 The physician of souls 32 “knows what despair

28 Ibid.

29 Schlomit C. Schuster, “Philosophical Counselling,” 220.

30 Alex Howard, “What can Philosophy Offer Counselling and Psychotherapy?” 411.

31 Søren Kierkegaard, The Sickness Unto Death, XI 137.

32 Ibid., XI 140.
is; he recognizes it”\textsuperscript{33} and will not be swayed by the individual’s claims of illness or health until the physician himself has identified the sickness. Unlike a physical illness where the symptoms seen are said to manifest due to the illness taking hold of the individual, the affections that are seen as symptoms of the illness of despair are merely the superficial symptoms of an individual who has been “in despair [her] whole life.”\textsuperscript{34} This is because “despair is a qualification of the spirit, is related to the eternal, and thus has something of the eternal in its dialectic.”\textsuperscript{35} It is then in the physician of the souls’ specialized ability to be able to determine the difference between the dialectical symptoms of despair and the superficial deceptions that also direct the physician to the diagnosis of despair. These symptoms can be as misleading due to perceived tranquility or security or as depressing as dejection or inner conflict. The individual’s inherent despair is seen in the surfacing of life problems that are characterized by “neurotic, self-indulgent and/or self-destructive behaviours, […] feelings of helplessness, aimlessness, antipathy, depression, and meaninglessness.”\textsuperscript{36} And unfortunately, even if the individual’s symptoms do not differ from the normative levels (society’s temporal baseline) in a significant manner (reaching levels below or above the baseline), the individual may fail to recognize that her ‘normal’ “indisposition is precisely to be in despair.”\textsuperscript{37}

\textit{Progression within the Medical Community}

The medical and mental communities have both made a dramatic degree of progression in how the individual’s symptoms and ailments have been perceived and diagnosed. For example,

\begin{itemize}
\item \textsuperscript{33} Ibid.
\item \textsuperscript{34} Ibid., XI 138.
\item \textsuperscript{35} Ibid.
\item \textsuperscript{36} Kenneth F.T. Cust, “What is Philosophical Counseling?” 1
\item \textsuperscript{37} Søren Kierkegaard, \textit{The Sickness Unto Death}, XI 139.
\end{itemize}
until 1938, Cabot’s manual of *Physical Diagnosis* lacked any reference to the importance of addressing a patient’s history and so, “beyond the disease, the patient was merely a passive receptacle—a good, bad or indifferent historian, without an independent view.”38 Eventually, patient recognition was promoted especially in terms of mental health. The connections between physical ailments and the individual’s mental state were finally acknowledged. As a result, medical experts were beginning to inquire about the individual’s “social history.”39 This included “the patient’s mental attitudes to [her] life and work [because] one should endeavour to visualise the life of one’s patient, sharing [her] emotions and viewing step by step [her] daily habits” in order to understand the individual in a more holistic manner.

Unfortunately twentieth century’s medical discourse and practice still has a tendency to immediately concern themselves with the so-called physical signs rather than considering the patient-oriented symptoms and often fails to view the individual as a whole. The practitioners have all but removed the individual from the actual scenario in order to diagnose the physical ailment. And though the symptoms (what the patient feels) could potentially aid the doctor in making a diagnosis, the “separation between sign and symptom (body and mind)” became part of the formula in the doctor’s overarching role of medical banality and physically-dominated worldview. The commonly used reductionist perspective is too simplistic. Behaviourism psychology, based on a form of reductionism, has not provided the best means towards achieving self-actualization. It revokes the potential for the individual to have the ability to self-motivate, without external stimuli, to produce change within one’s life. As a result, the individual remains a product of nature rather than a figure able to move within or independently of the environment.

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39 Ibid.
In order to move past these biases, Kierkegaard notes that it is important for the physician of the soul to “look behind the patient’s words and impute [her] own interpretation” in case of the individual’s ignorance towards despair, but it is also important for the physician and individual to take part in a “discourse of reciprocity and sensitivity”\(^\text{40}\) in order to help the individual along her philosophical pathway. As a result, “sincere communication”\(^\text{41}\) is used within the field of philosophical counselling in order to provide an authentic dialogue between the counsellor and the individual. As a result, Schuster compares the role of the philosophical physician to that of Socrates’ intellectual midwifery where the counsellor guides the client in the “art of living by giving meaning to the burden of life.”\(^\text{42}\) This then increases the client’s awareness about her temporality position within society and her incubated despair thereby providing insight that will allow the client to find meaning within her life therefore making life more meaningful and continuing her quest for the truth.

\(^{40}\) Ibid., 423.

\(^{41}\) Schlomit C. Schuster, “Philosophical Counselling,” 219.

\(^{42}\) Ibid., 220.
Philosophical Counselling

Even Socrates, the most influential philosopher, admitted that he had yet to reach the pinnacle of the philosophical life but Howard suggests that the ideas of philosophers such as Kierkegaard and Socrates may be “more valuable than their own lived practice.”\footnote{43} This pertains to the reasons that Kierkegaard removed himself from the listing of author for \textit{The Sickness Unto Death} and instead invoked the use of a new pseudonym. Additionally, though there is a lack of a concrete example (though Kierkegaard argues the case for using Christ as the model) of one who has carried out what Plato, Aristotle, and Epicurus referred to as \textit{eudaimonia}\footnote{44} (the ‘well lived’ life), philosophical counsellors continue to encourage their clients to re-focus on the writings of philosophers that point to action and commitment. As a result of this active and philosophically-driven process, the word philosophical now becomes an equal noun partner within the term of philosophical counselling.

While philosophy and traditional psychology may initially seem incompatible, the questions that philosophy uses as a guideline for seeking the truth in life provide the foundation for counselling where the individual to establish’ her \textit{authentic self}. For example, a philosophical practitioner often incorporates the Socratic Method within counselling sessions. The Socratic Method consists of a series of questions from teacher to student that is philosophically designed to force one to examine one’s own beliefs to achieve a higher understanding and truth in a reflective and dialectical manner. And while the main process of counselling incorporates the foundational questions about identity, meaning, and purpose within one’s life, Howard considers an individual’s personal philosophy or lack thereof to be limiting because the individual rarely

\footnote{43} Alex Howard, “What can Philosophy Offer Counselling and Psychotherapy?” 417.

have the “means of locating or assessing it.”\textsuperscript{45} That is why Howard asserts that philosophy is not only useful but necessary within the field of counselling rather than psychology.

Unfortunately, modern academia in fields such as psychology often make assumptions about “identity, purpose and methodology” and has “presupposed a body of knowledge”\textsuperscript{46} rather than encouraging its students to explore the basis of these assumptions or implanting a desire to seek the highest truth. But some experts, such as Howard, deem existentialist-type of philosophical questions to be incompatible with psychology by asserting that philosophy’s grand questions “cannot be squeezed into the narrower therapy agendas of contemporary psychology.”\textsuperscript{47} The ineffectiveness of such psychology is especially seen during in how people carry out their lives, how they seek solace in the temporality of the word, and in their faded desire to partake in the active process of philosophy due to society’s temporal distractions. Instead, the individual seems content to carry on with what the true philosopher knows to be the not-so-blissful ignorant life where despair still lays in the heart of the seemingly happy individual.

Wertheimer states that psychologists (specifically, clinical psychologists or psychiatrists) should be expected to know the history of their discipline. This includes the origins of the quest to understand the mind in a broader, more abstract sense: that which is philosophy.\textsuperscript{48} Freudian psychoanalysts suggest that a greater understanding of one’s early experience or history may help provide a deeper discovery of oneself. If this is so, then delving into the philosophical origins of psychology should then provide a reflective pool of the counsellor’s academic identity.

\textsuperscript{45} Alex Howard, “What Can Philosophy Offer Counselling and Psychotherapy?” 411.

\textsuperscript{46} Ibid., 412.

\textsuperscript{47} Ibid., 411.

On the other hand, a chronological account of the history of therapy will not provide the reader with an understanding into the significance that philosophy has played in the movement towards the study of the mind and the eventual development of client-centered therapy that is similar to Socratic Midwifery. Instead, an overview of the progress of the medical and psychological community in terms of a shift towards utilizing the fundamentals of philosophy, such as engaging the patient in an authentic dialogue or having a perspective that endorses the importance of the individual self-awareness (inwardness), would be more useful to understanding the field of philosophical counselling.

Psychology was practiced for many years before well-known psychologist Carl Rogers came onto the scene, though it was he that inspired the art of counselling and non-directive, otherwise known as client-centered, therapy. This was revolutionary because it was built on an authentic interaction between the individual and the medical practitioner rather than merely applying a diagnosis based on pre-conceived notions of mental health or relying on ill-ascribed theories relating to disruptions within normative development (Freudian Theory). Additionally, counselling has a history that is fundamentally linked with the “changes that have taken place within medical practice itself” where medicine continually seeks alternative types of therapy that incorporate philosophical practices such as existentialism. As a result, the counselling movement has begun to become more aware of its philosophical influences and has produced a practice that encourages introspection, spiritual development, and the desire for truth: philosophical counselling.

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Philosophical counselling is therapeutic in its effects.\textsuperscript{51} According to Dr. Armstrong, “counselling is often perceived as but one step in a long process of gradual enlightenment and progress along the road to ‘whole person medicine.’”\textsuperscript{52} Moynihan suggests that the modern publications are only formalizing the spiritual and physical healing that has always concerned the philosopher. While philosophical counselling is a new field (20 years old), philosophical counselling by philosophers is now an accredited form of psychological and spiritual healing. The philosopher is able to apply her academic knowledge of philosophy as well as her personal experience of carrying out the life of a philosopher to the “particular dilemmas, predicaments, and concerns”\textsuperscript{53} of her individual clients. The process is unique from the process used by lay-psychologists because the philosopher seeks to go deeper than the usual prodding of the client’s past and conducts a “philosophical examination of the underlying assumptions, concepts, theories and ideas of the client’s stated concerns” especially once the client has ascended to the intellectual mode of counselling. In an existential manner, the philosophical counsellor assists the individual in “exploring the most basic philosophical ideas which provide the foundation for the client’s view of the world and [her] place in that world.”\textsuperscript{54} Once the individual has gained an awareness of her true self and the restrictive qualities of the temporal world on her quest for self-actualization, she can understand society as a repressive regime on other individual’s awareness of inwardness. The public is merely a collection of individuals who are either in the process of seeking their true self or unaware of their eternal spirit. As such, the individual who has gained

\textsuperscript{51} http://www.ufv.ca/faculty/philosophy/raabep/what.html

\textsuperscript{52} C. Moynihan, “A History of Counselling,” 421.

\textsuperscript{53} Kenneth F.T. Cust, “What is Philosophical Counseling?” 1.

\textsuperscript{54} Ibid.
an awareness of her eternal self and who has ascended to the intellectual mode assume the role of guiding others towards her awareness of self: the role of the physician of the soul.

*The Physician of the Soul’s Role*

The founding philosophical counsellor, G. Achenbach, was aware that philosophy was being cemented into the exclusive category of academia. He understood that philosophy was not merely academic or theoretical but was a way of life that needed to be introduced to the ordinary individual and so he created an institute in 1981 and his followers continued the trend of opening philosophical practices all over the world. Much like the students of the Greek philosophers, Achenbach’s followers trained and challenged each other in “philosophical conversation”\(^{55}\) and while Kierkegaard suggested that the spiritual healer must *sometimes* depend solely on what they see and hear and to not take what the patient said as an accurate interpretation of the ailment, Achenbach believed that treatment consisting of providing a diagnosis based on symptoms was not appropriate therapy. He recognized the historical tendency to fully neglect the individual’s role in regards to the ailment and so, just as a doctor’s “first task is to listen and to observe [...] to understand the patient as a person,”\(^{56}\) Achenbach believed that the physician of the soul also has the responsibility to practice in a “reflexive manner.”\(^{57}\) He understood the dialectical process to be more about offering questions so the individual could “reach a deeper, more inclusive insight into the question or problem.”\(^{58}\) Achenbach did not consider interpretation to be “the discovery of the underlying truths behind what is being said”\(^{59}\) whereas many mental health (and physical)

\(^{55}\) Schlomit C. Schuster, “Philosophical Counselling,” 220.


\(^{57}\) Ibid.

\(^{58}\) Schlomit C. Schuster, “Philosophical Counselling,” 220.

\(^{59}\) Ibid.
adhered to this one-sided process. Achenbach founded philosophical counselling on the basis of providing an environment of “mutual equality”⁶⁰ and the continuous philosophical process that remains uninterrupted by concrete conclusions, but should instead be “like a pathway continually opening up new insights.”⁶¹ As such, “the counsellor merely listens, facilitates, [and] enables the client to discover for themselves her own values, priorities, direction, esteem, identity and reasons for living.”⁶² This facilitation enables the individual to ask questions and find her own answers in a similar manner to Socrates’ act of intellectual midwifery.

Shlomit C. Schuster explains the process of philosophical counselling by referring to the importance of the philosopher focusing on the questions and problems that are introduced and deemed important to the individual.⁶³ According to Schuster, philosophical counselling consists of an academically trained philosopher carrying out a dialogue with a ‘sane,’ or rather, a ‘whole’ person that creates a “didactic philosophical process.”⁶⁴ In doing so, the individual becomes an “authentic thinker” and becomes able to provide her own pathway to becoming “more philosophical in thought, word and action”⁶⁵ while seeking the truth.

Unfortunately, philosophical counsellor Peter B. Raabe considers the field as one that “still suffers from a lack of identity”⁶⁶ and so he sought to create a comprehensive academic model of

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⁶⁰ Ibid. 220.
⁶¹ Ibid.
⁶² Alex Howard, “What can Philosophy Offer Counselling and Psychotherapy?” 513.
⁶⁴ Ibid.
⁶⁵ Ibid.
philosophical counselling. And even though critics, such as C. Neutel, claim that Raabe had not sufficiently done so, he had begun to move the field in the right direction. Though Raabe tries to emphasize the importance of philosophy within the counselling and psychotherapeutic realm, he is still one individual that is in the process of developing his own approach to philosophical counselling. This is still an indicator of the gap within this field: many counsellors do not focus on or adhere to the classics and fall into the trap of incorporating introductory-level philosophy into her sessions rather than delving into the core of the philosophical teachings and encouraging her clients to seek inwardness and truth within her lives.

Whereas Raabe suggests that a philosophical model should be used within philosophical counselling in order to provide consistency and a focus on core elements of philosophy, philosophers, Achenbach and Sloterdijk, are adamant that the philosophical practice should not adhere to methodology. Achenbach once stated that “philosophy does not work with methods, it works on methods; it does not work with theories, but on theories.” Therefore, there must be something intangible within philosophy that cannot be confined in a manner that creates academic protocol. If philosophical counselling is truly a modern-day product of the ancient art of living, then philosophising is meant to be a continual process where the counsellor, through the dialectical process, provides the client with a “fresh self-explicatory impulse” and allows the client the freedom to be an intellectual individual that is able to have philosophical insight into everyday life.

67 Schlomit C. Schuster, “Philosophical Counselling,” 220.
68 Ibid.
Neutel suggests that the outcome of the sessions or the direction of the counsellor would seem to depend on her own “philosophical leanings” regarding the particular philosophers whose teachings that she follows. He emphasizes the need for a broad academic knowledge base about various philosophers such as Nietzsche, Sartre, Aristotle, Aquinas, Marx, or Kierkegaard in order for the philosophical counsellor to have an “unrestricted agenda.” Raabe also acknowledges that “when the philosopher restricts [her]self to the concepts of one philosopher, or to the structures of one philosophical system […] she is forced to manipulate the philosophical dialogue so that it suits [her] agenda.” And so, it is important that the client maintains an active role of philosophizing and that the counsellor does so as well in order to be aware of her own “philosophical dispositions and assumptions.”

Interestingly, philosophy is already integrated into the field of counselling but “more often than not, it is not recognised” and that is the key element within philosophical counselling. Just as in Kierkegaard’s dialectic format of writing, “the best philosophy is like a conversation” where the individual, centuries of philosophers, and the counsellor all have various viewpoints that have the potential to make a significant contribution to the conversation’s outcome, if there is or should be an outcome at all (whether self-actualization is actually achievable).

Philosophical counselling is not about methodology, answers, or problem-focused solutions but

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69 C. Ineke Neutel, “Philosophical Counselling: Theory and Practice,” 2.
70 Ibid.
71 Ibid.
72 Ibid.
73 Alex Howard, “What can Philosophy Offer Counselling and Psychotherapy?” 415.
74 Ibid.
rather enabling the individual to “attain philosophical skills, attitudes and knowledge.”

Howard recognizes that philosophy “provides the foundations on which the practice of human attention stands, the roof beneath which it shelters, the walls within which it is contained and the windows through which it looks out on the wider world” and the society in which the individual lives.

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75 Schlomit C. Schuster, “Philosophical Counselling,” 219.

76 Alex Howard, “What can Philosophy Offer Counselling and Psychotherapy?” 514.
The Manner in Which Despair is Communicated

Kierkegaard’s *The Sickness Unto Death* focuses on the meaning of anxiety and despair. Kierkegaard once stated that “the present age is the age of despair” and while *The Sickness Unto Death* “presupposes anxiety,” the concept of despair concerns Kierkegaard the most. The dedication of previous works to themes such as anxiety, sin, and forgiveness provided Kierkegaard with a lifetime to live out “genuine anthropological contemplation” which he claimed had been missing. Kierkegaard eventually targeted despair as his central theme in his lifeworks of interest in the individual’s process in regards to the “becoming of the self.”

Kierkegaard provides a detailed analysis of despair in a manner where the Christian and Socratic viewpoints are synthesized due to *The Sickness Unto Death’s* authentic dialectical format. This format allows Kierkegaard to discuss the concept of despair from a Christian perspective but provides the reader with the freedom to apply Kierkegaard’s thoughts in an introspective yet secular manner thereby making it accessible to every individual who takes it upon herself to contemplate Kierkegaard’s works.

Kierkegaard has previously (in other works) brought the reader’s awareness to his tendency towards “maieutic carefulness.” He describes this phrase as a method of discourse that proceeds slowly and, according to the unsuspecting reader, as if Kierkegaard does not know what

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78 Ibid.

79 Ibid., x.

80 Ibid., ix.

is to come next. This refers to the Socratic method of midwifery where the philosopher acts in accordance to the premise that presumes that the truth lies dormant in the individual’s mind. The philosopher then proceeds in a line of rational questioning in order to encourage the individual to access this latent knowledge.

This deliberation-style of writing does not presume that his readers have a working knowledge of the concept that is to be addressed and analyzed even if the concept had already been defined and commonly understood by the society. And, in Kierkegaard’s opinion, society is characterized by its “diluted social morality”82 and as a result, any abstract notions of the ethical variety are most likely be distorted from the original biblical teachings (the basis of Kierkegaard’s philosophical writings). In *The Sickness Unto Death* (much like in *Works of Love*), Kierkegaard wishes to move the reader away from any ambiguously preconceived notion of despair and to “turn [her] comfortable way of thinking topsy-turvy with the dialectic of truth.”83 In doing so, Kierkegaard places an emphasis on the necessity for the reader to slowly ponder over his Christian deliberation. Kierkegaard claims that if the reader does so, then the material will be easily but slowly understood. Kierkegaard also makes a reference to “that single individual”84 who reads his works. He appeals to that reader to recognize his attempts to avoid presenting the Christian material with a “false weight”85 of increased ease or difficulty of reading and understanding in an effort to provide his deliberation with a sense of legitimacy. As such, the reader’s methodology should continue in a similar fashion during her analysis of *The

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82 Howard Hong & Edna Hong, introduction to *The Sickness Unto Death*, xii.
83 Ibid.
84 Ibid., xv.
85 Ibid., IX 7.
Sickness Unto Death. Similarly, just as Kierkegaard’s works are meant for difficult deliberation so is the process of philosophical counselling. Additionally, Kierkegaard’s works are directed towards the single individual just as the process of philosophical counselling is meant to be client-orientated. This is the contrast between the field of philosophy and modern psychology. Nowadays, the individual within the masses succumbs to the popularity of self-help books. These self-help books are a quick read for a quick fix whereas philosophical works are a dense read where each word and line is meaningful when read in the true manner. Kierkegaard was concerned with the individual reader within the masses and so his ideas were for the individual to absorb on a personal level. When using this approach, the individual is able to ponder on the meaning of Kierkegaard’s works and consider how it personally applies to her rather than considering what works for the rest of society’s citizens. In doing so, the individual becomes inwardly focused and begins the process of self-actualization.

Kierkegaard as the Poet?

Unfortunately, Kierkegaard considered the lack of his usual degree of lyrical prose in The Sickness Unto Death to be problematic because it did not ensure “the proper use of the rhetorical, the soul-stirring, [and] the gripping.” The majority of Kierkegaard’s works are lyrical and full of personal and the subjective truth, but he continued to place an emphasis on ‘the individual’ through the ultimate goal of inwardness. As such, his writings were connected very strongly to his personal life and his ultimate decision to be recognized as a “religious author.”

Kierkegaard’s fear was that “everything [he had] written, viewed as a totality, [would] be

86 Howard Hong & Edna Hong, introduction to The Sickness Unto Death, xiv.

87 Ibid., xv.
dragged down into the esthetic.”\textsuperscript{88} And so, with regards to \textit{The Sickness Unto Death}, it was necessary for Kierkegaard to maintain a balance between the “poetic ideality and personal actuality”\textsuperscript{89} and to submerge himself back into the world of pseudonymity. Still, it must be noted that Kierkegaard acknowledged a need for ‘self-education’ and though he allowed \textit{The Sickness Unto Death} to be published with himself titled as the editor, he asserted that “it is poetry—and therefore my life, to my humiliation, must obviously express the opposite, the inferior.”\textsuperscript{90} In doing so, Kierkegaard identified himself as “one who is striving”\textsuperscript{91} much like the individual reader that his work was catered to. This is similar to the act of philosophical counselling being mutually therapeutic to the client and the counsellor because both continue to strive towards the goal of establishing the authentic self. According to biographer Joakim Garff, Kierkegaard claimed that “his merit is due to ‘the cultivation of lyrical prose’”\textsuperscript{92} because, as Kierkegaard often mentions “[he] always have in mind a reader who reads aloud”\textsuperscript{93} thereby creating a dialectic with the reader herself. This shared goal for authenticity binds Kierkegaard to his works in a spiritually dramatic fashion he has created “a balanced esthetic and religious productivity, simultaneously” thus establishing full ownership of the \textit{upbuilding} within the \textit{The Sickness Unto Death}.

\begin{flushleft}
\textsuperscript{88} Ibid., xiii.
\textsuperscript{89} Ibid., xvi.
\textsuperscript{90} Ibid., xx.
\textsuperscript{91} Ibid.
\textsuperscript{93} Ibid.
\end{flushleft}
Careful consideration must be used when reflecting on Kierkegaard as a poet. It was not what he wrote that categorized him as a type of poet but rather the fact that he wrote that induced him to use the term ‘poet’ with reference to himself. Kierkegaard penned his literature in a manner that recognized that “next in importance to knowing the truth is [in] knowing how to communicate it to others” and he dedicated his life to mastering the art of communication. He once claimed that the world “lacked a prose with the stamp of art” and so he sought to maintain a “poet existence tending toward the religious” within his works. Kierkegaard sought to open the eyes of the esthetic reader by assuming the “guise of a romantic writer.” In doing so, he pretends to be an estheticist totally enchanted by romantic ideas but uses an approach that eventually illustrates the emptiness of the esthetic life.

Kierkegaard states that “these religious poets must have the particular ability to do the kind of writing which helps people out into the current.” As a result, Kierkegaard became a religious poet in order to encourage “poetic awakening” but he was aware of the necessity for him to do so in order to reach the individuals within a temporal world. Similarly, the philosophical counsellor must take the guise of the clinical psychiatrist but they do so while holding claim to a deeper understanding about the limitation of such a title. In a way, the philosophical counsellor

94 Ibid., 543.
97 Ibid., 542.
99 Howard Hong & Edna Hong, introduction to The Sickness Unto Death xvi.
100 Søren Kierkegaard, The Sickness Unto Death, xvii.
is carrying out a rendition of Plato’s Noble Lie. By labelling themselves as the clinical psychiatrist yet understanding themselves to be a philosophical counsellor first and foremost, the client is given the opportunity to be introduced with the concept of philosophy without being prevented by any preconceived bias that may come about due to the title of the professional. By the time the client reaches the level of awareness (intellectual mode) where she becomes aware of her previously temporal-based lifestyle, she is eager to continue the process that the philosophical counsellor has introduced her to. Therefore, the counsellor is carrying out her practice out of love for the process itself and for the therapeutic value that is bestowed on both the client and counsellor rather than for the false honour that such an esteemed title may provide thereby practicing authentic philosophy.

As a Socratic student, Kierkegaard understood that in order to inspire the individual to participate in seeking the eternal, he must first introduce the concept of inwardness. According to Kierkegaard, “to succeed in truth to bring a man to a certain place one must first and foremost be sure to find him where he is and begin there.” For this reason, Kierkegaard uses multiple analogies and continually refers to the individual reader in a way that directs the reader to reflect on her own existential position. Using a unique approach, Kierkegaard goes further than maintaining the importance of the reader’s presence and mental connection within the The Sickness Unto Death and actually places himself within the process of this religious movement. It is important to note that Kierkegaard often wrote in pseudonyms as a mode of indirect communication that would present a concept to the reader that was void of bias of authorship. Kierkegaard was inspired by the bible but wanted to avoid portraying himself as an ideal

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102 Gregor Malantaschuk, Kierkegaard’s Way to the Truth: An Introduction to the authorship of Søren Kierkegaard, 115.
Christian. And so, in order to remove himself from any sense of having a hypocritical stance, he wrote his work under the pseudonym of Anti-Climacus. Though Kierkegaard does not relate directly to either of his famous pseudonymous characters (Johannes Climacus and Anti-Climacus), he does assert that his personal position lies somewhere between the two. By acknowledging his own spiritual position, Kierkegaard maintains the role of the true philosopher. A true philosopher does not take part in the search for wisdom for external acknowledgement but the main exercise for their works is for their own journey. Though Kierkegaard wrote *The Sickness Unto Death* with a single individual in mind, he acknowledged his own position of striving towards the goal that he writes about and so he wrote using pseudonyms to maintain the need to continue to strive to become the self. Similarly, the true philosophical counsellor would not label herself as such. As a result, there is no need for the philosophical counsellor to use the equivalent of Kierkegaard’s pseudonyms because Kierkegaard used his synonyms for the specific purpose of establishing the ideal which was something that he had yet to achieve and that the counsellor has not achieved. The counsellor does not take on the role of the authoritative teacher but rather recognizes that the work she does is an element of her own self-actualization but that it is therapeutic due to her philosophical interactions with others: her clients.

*Kierkegaard’s Upbuilding*

Kierkegaard categorizes many of his pseudonymous as belonging to the esthete and though he considered himself to be religiously higher than these low pseudonyms, he recognized his inability to claim ownership over literature that was to be considered the ideal. He states that “upbuilding […] is more than [his] category, the poet-category.”

103 Unlike Kierkegaard’s well-known pseudonym Johannes Climacus who is considered to be so low that he could not be a

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103 Howard Hong & Edna Hong, introduction to *The Sickness Unto Death*, xxi.
Christian but who is patron of the esthetic, Anti-Climacus is a “Christian on an extraordinarily high level”\textsuperscript{104} and so Anti-Climacus becomes the what Ferreira refers to as the “authoritative teacher”\textsuperscript{105} with regards to despair. Kierkegaard felt that the “mode of presentation”\textsuperscript{106} of \textit{The Sickness Unto Death} may have been particularly dialectical but that it was still fundamentally Christian \textit{upbuilding} due to its ethical aspect and the earnestness that it is written with. Kierkegaard was very aware of the rigorous nature that \textit{The Sickness Unto Death} held for the reader but he was insistent that it was to promote a level of introspection that would necessitate the process of the “actuality of the personality”\textsuperscript{107} in an open, dialectical manner. Unfortunately, the risk of Kierkegaard is the reader attempting to briefly summarize the abstractness of Kierkegaard’s work and creating quick fix mantra by pulling out one lone concept rather than understanding the book as a whole. The individual may read the book but without absorbing the material in the appropriate fashion, the book just becomes another assortment of self-help literature that the individual desperately seeks to devour while in survival mode whereas the true meaning hidden within the words is meant for the individual who is presently in the intellectual mode and who is striving for becoming the authentic self (self-actualization). It is one thing to read the book but another to truly contemplate about and apply its teachings to one’s life yet it would seem to be inherent that if the individual does truly seek the authentic self then reading Kierkegaard’s \textit{The Sickness Unto Death} will not provide any therapy for the individual. Similarly, if the individual does not have inward motivation then she will not be able to take part in the process of true philosophy even if

\textsuperscript{104} Ibid., xxii.

\textsuperscript{105} M. Jamie Ferreira, \textit{Kierkegaard}, 149.

\textsuperscript{106} Søren Kierkegaard, \textit{The Sickness Unto Death}, XI 117.

\textsuperscript{107} Ibid.
the philosophical counsellor is alongside her.
Despair Is the Sickness unto Death

Kierkegaard considers the spirit (the essential element of a human being) to be the self. He then explores what the self is comprised of. Kierkegaard states that a human being is a synthesis of the relation of many elements to one another including that of the “temporal and the eternal […] of freedom and necessity”\(^{108}\) but emphasizes that there is still something lacking between the relation between the labelled elements. Kierkegaard speaks of the human self as that which is “an established relation […] that relates itself to itself and in relating itself to itself relates itself to another”\(^{109}\) thus becoming the positive third (the self). This is Kierkegaard’s roundabout method of stating that the self is not just a combination of body and soul but is a process and dialectic. It is not a concrete thing but it is an activity of engagement between two positions. For example, the individual relates her self between two tensions such as the such as the finite (narrow-mindedness) and the infinite (fantastical imagination). This dynamic dialectical movement of relating to oneself between the two aspects creates a tension that creates the active self because the self is never static. The relation is the self that is moving and struggling to maintain itself between the tensions. In order to solidify the idea of the “positive third,”\(^{110}\) the self must have “established itself or have been established by another”\(^{111}\) and must relate itself to another. In keeping with the Christian tradition, Kierkegaard suggests that it is the latter and that the creator is God.

\(^{108}\) Ibid., XI 127.

\(^{109}\) Ibid., XI 128.

\(^{110}\) Ibid., XI 127.

\(^{111}\) Ibid.
According to Kierkegaardian scholar, M. Jamie Ferreira, Kierkegaard’s focus is on the definition of the spirit and the self as a single individual.\textsuperscript{112} This relates back to Kierkegaard’s writing for the lone reader. Kierkegaard’s works are meant to be read, contemplated, and incorporated into the individual’s life in a true philosophical fashion. In a similar fashion, the philosophical counsellor provides philosophical guidance for the single individual who is in the process of becoming aware of this relation. The self that Kierkegaard speaks of is the “mediating activity that resides within opposites.”\textsuperscript{113} As such, literary commentator, Anthony Storm claims that Kierkegaard uses the term of “‘self” as a verb rather than as a noun”\textsuperscript{114} thereby incorporating the idea of “kinetic”\textsuperscript{115} action within the relation’s relating. This active process establishes a relation between the \textit{psychical} and the \textit{physical} and incorporates the concept of existentialism in regards to self-determination and the self’s relation to its establisher, God. Therefore, the kinetic self, according to Storm, possesses the “elasticity to relate itself back to God.”\textsuperscript{116} This relation is critical in regards to the psychical element of the self, the “inner dialogue,”\textsuperscript{117} and the greater relation to the establisher and the individual’s despair. The individual’s \textit{self} is in a continuous activity of becoming aware of its position in relation (on a mental level) to these opposites, some of which it is conscious of and others which it may not be.

\textsuperscript{112} M. Jamie Ferreira, \textit{Kierkegaard}, 152.


\textsuperscript{114} Ibid., 3.

\textsuperscript{115} Ibid.

\textsuperscript{116} Ibid.

\textsuperscript{117} Ibid.
This kinetic aspect of the self also allows for the ability to perform an “inner dialogue”\textsuperscript{118} and ultimately to have the element of self-determination. Counselling is the active process that consists of guiding the individual to obtain the skills and perspective that allows the individual to consciously mediate between the opposing factors mentioned by Kierkegaard. This process encourages the individual become self-aware and to actively take part in this dialectical process so that the individual can achieve what psychologist Abraham Maslow refers to as self-actualization or becoming “whole.”\textsuperscript{119}

\textit{The Origin of Despair}

The appropriate synthesis of the self or lack thereof, creates the foundation for despair to arise; specifically, to despair not to be conscious of having a self, in despair not to will to be oneself, and in despair to will to be oneself. Though Kierkegaard addresses each of these forms of despair, he admits that “all despair is ultimately traced to the despair not to will to be oneself”\textsuperscript{120} and ultimately, in the power that established the self. Due to the internal relation to the establisher (God), the synthesis of the self occurs in an internal and introspective manner. This indicates that there must be an element of self-determination in order for the individual to engage in establishing her true self by maintaining a balance within the synthesis of her self.

Kierkegaard also makes a point to distinguish between the concept of despair and its actuality. He explains that the abstract notion, or rather, of despair signifies “man’s superiority over the

\textsuperscript{118} \textit{Ibid.}, 3.


\textsuperscript{120} \textit{Ibid.}, 4.
animal” due to the essence of the self (spirit). The acknowledgement of the possibility of despair creates another level within Kierkegaard’s hierarchy. Kierkegaard promotes the notion that the Christian’s inner awareness (kinetic essence) about despair establishes something that the natural man does not have. As a result, it would seem that Kierkegaard is advocating that “to be able to despair is an infinite advantage” and yet he claims that the actual state of being in despair is “ruination.” He once again speaks about despair as being a continuous and active process and therefore, to not be in despair refers to the individual destroying any possibility of despair “at every moment” which would, in turn, result in negation of possibility or rather, “a denial.”

Kierkegaard considers despair to be the “misrelation in the relation of a synthesis that relates itself to itself” and so the self must claim responsibility for each moment of despair rather than seeking to abandon despair as an object instead of as a relation. For example, Kierkegaard uses an analogy of person who is physically sick. The origin of the illness may be ambiguous but the continuous process of the illness consuming the individual becomes the actuality and so the “origin recedes more and more into the past.” And so, though the individual may have been the cause for the illness to occur, the individual is not at fault for “bringing it upon himself” in

121 Søren Kierkegaard, The Sickness Unto Death, XI 129.
122 Ibid., XI 129.
123 Ibid.
124 Ibid.
125 Ibid.
126 Ibid., XI 130.
127 Ibid.
128 Ibid.
a continuous manner. Unfortunately this does not remain true in regards to despair. Kierkegaard maintains that “every actual moment of despair is traceable to possibility; every moment [the individual] is in despair [the individual] is bringing it upon [oneself].”

The Universality of Despair

Every individual within and outside of Christendom who is not a true Christian is “to some extent in despair.” This despair is present in every individual going about her daily life but is seen in the “unrest, an inner strife, a disharmony […] or an anxiety” that provides a baseline of despair within every individual. Kierkegaard warns against the “superficial view” that each individual should or can know whether she is in despair because, in society, the common view held by the citizens is that they are not in despair and therefore, a social myth is born: that “the phenomenon of despair is infrequent.” The individual’s claim that she is not in despair is not necessarily accurate because the individual may not be conscious of being in despair. Similarly, Kierkegaard once again uses the analogy of the physically ill person who claims that they are not sick or healthy but whom the physician does not believe because physician has a greater expertise on the definition of sickness and health especially what the physician may claim is the individual’s ignorant and wishful thinking about her “imaginary health.” Similarly, the physician of the soul is aware of symptoms of true (awareness) and false despair (temporal despair) because the physician is also aware of her own state of despair and resides in the

129 Ibid.
130 Ibid., XI 136.
131 Ibid.
132 Ibid.
133 Ibid., XI 137.
134 Ibid.
intellectual mode and now recognizes the individual who remains on the baseline or, even worse, in the survival mode (false despair). The physician is aware of the need for the individual to ascend to the intellectual mode and become aware of her state of despair in order to continue along the philosophical journey of establishing her authentic self.

*Kierkegaard’s Platonic Cave*

Using an allegory, Plato teaches that rational reflection, meditation, and introspection are the true means to delving into oneself and attempt to discern the truth but that it may be improbable because even Socrates admitted that he had yet to reach the pinnacle on his quest for the truth. This explorative process of the self provides the foundation for Carl Roger’s client-centered therapy. The external world provides a multitude of distractions from the self. Materialism, hedonism, and egoism have polluted the minds of the earth’s patrons and prevented them from fostering a desire for wisdom. Plato outlined the categories of men that remain subservient to the higher, philosophical ideal. There are those that primarily concern themselves with the “satisfaction of organic needs,”¹³⁵ those that base themselves on emotion, and finally, the contemplator.

If the ideal really does “exist outside of [the individual], independently of [her], and is immutable and perfect”¹³⁶ then can the individual truly achieve self-actualization or discover the sunshine that glows outside our cave of ignorance? As a Socratic student, Kierkegaard was well aware of the ill-sustained misconception that the individual holds in regards to her supposed happiness. In an analogy that reminds the reader of Plato’s allegory of the cave,¹³⁷ Kierkegaard

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¹³⁶ Ibid., 13.

states that the “truth about the majority of people is that in their own house they prefer to live in the basement.” The basement gives a concrete portrayal of how the individual defies the intuitive notion of living in the top floor of the house with the occasional venture into the basement. Instead, the individual prefers to wallow or rather, in her eyes, to remain in the shallow foundation of the sensate portion of life. Such behaviour is justified because the individual claims that it is her own house and she chooses to carry out such a living arrangement. Kierkegaard would suggest that it is merely because the individual lacks the courage to “venture out and become spirit” whereas Plato gave the individual the benefit of ignorance of what lay beyond the temporal world. Either way, Kierkegaard is adamant that the individual’s condition is despair but the individual has succumbed to the “enchantment of illusion.” Ignorance is not a mitigating excuse and it merely burdens the individual with a “new negativity” rather than the original negativity of being in despair and remaining at a distance from the truth. Kierkegaard reminds the reader that in an “ethical-dialectical sense,” an individual that is conscious of one’s own despair but remains so (the person living in the basement) remains in a more intense category of despair and even further from deliverance (sin).

Using counselling terminology, the individual who has gained full knowledge of the absolute is one who has achieved the process of becoming self-actualized or rather, becoming her authentic self. Rogers believed that this process of self-actualization would incorporate greater insight, adaptation (survive in the changing environment), and realization of one's potential 

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138 Søren Kierkegaard, The Sickness Unto Death, XI 156.
139 Ibid., XI 155.
140 Ibid., XI 156.
141 Ibid.
142 Ibid., XI 157.
especially in an environment that is free of coercion and distortion. The word phrase, authentic self, is not found in The Sickness Unto Death, but this process can be derived from Kierkegaard’s description of despair and the process of alleviating the individual’s despair. And while Kierkegaard claims that only the true Christian can manage to live without despair, philosophical counselling helps the individual to begin the process of asking questions to become fully conscious of the relation of the individual’s self. To become the authentic self or to become obtain self-actualization would suggest an end point to the philosophical process but Kierkegaard refers to the self’s constant struggle to maintain equilibrium and to relate itself to the external source (God). This is similar to theorist, Kurt Goldstein’s notion that self-actualization was actually the motivation behind the process but he did not believe that the process ever reached Maslow’s pinnacle. Therefore, Even if the counsellor provides adequate therapy it does not necessarily “heal” the individual of her despair. There is a crucial element of self-determination that the individual must make the continuous conscious decision to take part in her journey and to maintain it at every moment. Just as the individual in Plato’s allegory of the cave is unshackled, she may remain unaware of her surrounding conditions (despair) and continue to be content with the entertainment of the shadows on the wall that consumes her full attention. But, if the individual were to take notice of her surroundings then it becomes her responsibility to continue exploring the path that eventually leads to the exterior world (the sun; the truth; wisdom). To do so, the individual must abandon her previous object of focus (the shadows) and recognize the shadows to be meaningless compared to the figures that are the cause of the shadows. The individual must overcome her fear of the unknown thereby taking what Kierkegaard refers to as the leap of faith in order to discover the truth.
Kierkegaard states that “every moment that a self exists, it is in a process of becoming” but the individual continues to remain in a state of despair. Unlike a death that results from a physical illness, “the torment of despair is precisely this inability to die” from the temporal world. Kierkegaard’s concept of despair suggests that even when applied in a secular manner, if the individual’s despair could potentially end with her death, the structure of the self ensures that the individual will always suffer the pain of despair while alive. This is due to the constant tension between the polarities (infinite and finite; necessity and possibility). The individual must engage in dialogue between all of her tensions in order to find her true self. Kierkegaard argues that this process requires an external element to create equilibrium within the self. And so, Kierkegaard uses religion to bridge the finite and infinite conceptions.

Kierkegaard describes three main categories of despair: to despair not to be conscious of having a self, in despair not to will to be oneself, and in despair to will to be oneself. Kierkegaard states that consciousness is “decisive with regard to the self” and creates the qualitative distinction of despair. Kierkegaard explains that “the more consciousness, the more self; the more consciousness, the more will; the more will, the more self.” This indicates that if the individual becomes aware of her current state of despair then a connection to her true self is created thereby increasing the individual’s motivation to continue to take part in the process of establishing her authentic self. And yet, Kierkegaard argues that “the greater the degree of consciousness, the more intensive the despair.” This suggests that the concept of merely being

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143 Søren Kierkegaard, The Sickness Unto Death, XI 143.
144 Ibid., XI 131.
145 Ibid., XI 142.
146 Ibid.
147 Ibid., XI 154.
unaware or knowing of one’s state of despair is a false dichotomy. The level of consciousness of one’s state of despair can vary thereby creating various types of despair due to the nature of the self (the tensions). This is also due to the individual’s having a true conception of what despair is. Societal elements such as narcissism, consumerism, and hedonism become a diversion from the individual recognizing her eternal self. Though the individual may have some level of “psychological insight,” the average individual lacks a deeper sense of inwardness and so in the individual’s ignorance there is indeed a level of “a dialectical interplay between knowing and willing.”¹⁴⁸ This relates to Kierkegaard’s theory that even if the possibility of the individual being in despair was brought to the individual’s attention, it would prompt an indignant refusal to even consider it because to do so potentially “murders [her] happiness.”¹⁴⁹

_Ignorance of Despair_

The unconsciousness of despair, or rather, ignorance would be the furthest end of the spectrum of the individual’s awareness of her state of despair. In regards to the individual’s relationship to the truth, Kierkegaard suggests that the “sensate in [her] usually far outweighs [her] intellectuality.”¹⁵⁰ This tendency to succumb to the esthetic categories of the world traps the individual within the _base mode_ until the individual becomes aware of the temporal distractions of the world thereby providing the opportunity for the individual to ascend to the _intellectual mode_. The individual of the masses lives within the esthetic base mode with a “very meager conception”¹⁵¹ of oneself, if any at all. The individual lives the life of the esthete while allowing themselves to presume to be happy with no concept of the truth or absolute self that

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¹⁴⁸ Ibid., XI 160.

¹⁴⁹ Ibid., XI 155.

¹⁵⁰ Ibid.

¹⁵¹ Ibid.
they ought to seek to be. The goal of philosophical counselling is for the individual to gain an understanding of the true conception of Kierkegaardian despair. Additionally, through the philosophical counselling process, the individual should come to understand that even with her basic level of awareness of her state of despair, she is still deeper in despair than she can initially recognize and that her despair is on an even “profounder level.”

The majority of society’s citizens are unaware that they have an eternal self. This is because the individual has the wrong conception of what a self is and often lacks the “capacity for reflection.” The individual does not recognize herself to be in despair because she sees despair to correspond to society’s definition of unhappiness. Kierkegaard argues that despair is not the equivalent of unhappiness and that the individual can be in despair even if she judges herself to be ‘happy’ by social standards. Kierkegaard claims that happiness is not a qualification of the spirit and so the superficial and temporal elements of the individual’s environment are still indicators of despair lurking within the individual. As Kierkegaard explains it, “deep, deep within the most secret hiding place of happiness there dwells also anxiety, which is despair [… because] the most cherished and desirable place to live is in the heart of happiness” or rather, perceived and socially-valued happiness. Temporality creates a blanket of superficial happiness that cloaks the minds of the human masses so that they do not realize that they are living in a state of despair and sin.

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152 Ibid., XI 159.
153 Ibid., XI 166.
154 Ibid., XI 139.
Kierkegaard acknowledges that even in a state of despair an individual can exhibit what appears to be “an intense, energetic life”\(^\text{155}\) but Kierkegaard maintains that this form of despair is the most common because it provides the individual with the appearance of vitality and happiness. The “natural man”\(^\text{156}\) in Christendom (the sociological category rather than the ethical and religious category) lacks the ability or inwardness to identify this deceptive form of despair whether in others or oneself. Specifically, the individual lacks the ability to make the “distinction between being in despair and not being in despair”\(^\text{157}\) because they rely on assessing despair by its esthetic qualities that are supposedly its symptoms (the societal myth). As a result, the individual is maintaining her existence within the base mode and incorrectly assumes despair to be the state of existence when she falls into the survival mode. This assumption is cultivated by society’s temporal values and instills the idea that despair occurs when these temporal elements are lost. Essentially, the sense of false despair provides a sense of unhappiness that is not the equivalent to Kierkegaardian despair. The average individual is one of “immediacy”\(^\text{158}\) with no ability for self reflection and remains a passive receptor of the external world rather than an individual who is actively seeking the eternal.

The ignorant state of the individual is represented by the mental state of mind that is the baseline. The individual is unaware of her state of despair due to the temporal distractions that have provided her with a sense of this false happiness. As a result, the individual construes the state of despair to be equivalent to the survival mode that she descends to when the object of her happiness is removed. Kierkegaard claims that the necessary element for diagnosis of true

\(^{155}\) Ibid., XI 157.

\(^{156}\) Ibid.

\(^{157}\) Ibid.

\(^{158}\) Ibid., XI 163.
despair is the application of the “ethical-religious category.” No matter how wonderful the individual’s life may seem, if her existence is not consciously aware of itself and its relation before God then it remains in despair. Therefore, the individual only gains an inkling of the true concept of despair when she acknowledges something greater than herself and the worldly elements that surround her in everyday life. The ethical-religious actors or, rather, the philosophers are aware of the esthetic distractions of the world and consider the “virtues of the pagans [to be] glittering vices” that bury despair deep in the heart of false happiness.

**False Despair**

While the individual in despair is thought to despair over something earthly, this something signifies that the individual is actually despairing over the self or rather, the lack of the authentic self. Kierkegaard states that the individual despairs because she is not her true self. The individual seeks to become someone else in order to although not necessarily her true self but if this fails then the individual despairs over her inability to be rid of herself. Both categories of despair are consequences of an “active posture” towards the process of establishing the authentic self rather than a passive submission to the external world as in the state of being ignorant in despair.

Kierkegaard states that the individual who is in despair who does not will to be oneself or wanting to be someone else is submerged in despair of weakness. The next stage of this despair is to “despair over oneself.” The core element of Kierkegaardian despair is revealed: the

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159 Ibid., XI 158.

160 Ibid.

161 Ferreira, M. Jamie, *Kierkegaard*, 156.

individual is “in despair to will to be rid of oneself.”¹⁶³ The individual wishes to be a self that the individual is not (presently), essentially the self that the individual has “dreamed up”¹⁶⁴ rather than to desire to be the self that the individual is in truth (self-actualized). Unfortunately, even if the individual seeks to abandon their present self and become another, this is impossible because the self that they would create is still not the authentic self. Instead, the individual remains one of immediacy¹⁶⁵ and she “identifies [her]self only by the clothes [she] wears, [she] identifies having a self by externalities.”¹⁶⁶ In her eyes, she is victim of the external world and is dissatisfied with her unhappiness (false despair). The individual who experiences false despair is merely allowing an external event to impinge on her and upset her in a worldly manner. The individual then desperately seeks to regain stability by ascending back to the base mode without gaining an awareness of the true concept of despair.

And so, in her continuing ignorance of true despair, she becomes desperate to regain that which she believes will make her happy: the temporal elements. When the temporal baseline of the individual’s world is lost to her, it seems to be a “stroke of fate” the material or amoral values that the individual clings onto is whisked away from her and the individual becomes unhappy. Essentially, the individual’s immediacy is “dealt such a crushing blow that it cannot reproduce itself: [she] despairs” but “to lose the things of this world is not to despair” and so the individual is incorrect by labelling this unhappiness as despair thus plunging the individual into the survival mode (a realm of ignorance and perversion of the true concept of despair) rather than ascending to the intellectual mode to where an inkling of true despair can be shown. Despair in this sense

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¹⁶³ Ibid.

¹⁶⁴ Ibid.

¹⁶⁵ Ibid., XI 166.

¹⁶⁶ Ibid.
is “only a suffering, a succumbing to the pressure of external factors; in no way does it come from within as an act.”\textsuperscript{167} This individual is “bound up in immediacy with the other in desiring, craving, enjoying [...] yet passively” and is contained within the constraints of a simple dichotomy of “the pleasant and the unpleasant”\textsuperscript{168} thereby solidifying the hierarchic model of the base and survival mode.

Unfortunately, the average individual will never become aware of her true state of despair. The despairing person is mortally ill and yet, the only cure is to die. Ironically, the individual who falls into a state of false despair regards herself as “dead.”\textsuperscript{169} This inaccurate conception of despair may motivate the individual to seek external help but often, this help is merely to provide the individual with the tools to regain her temporal stability (the baseline). In modern society, this external help is often in the form of counsellors and psychiatrists. If the individual does obtain this help then the individual “comes alive again [...]but she] begins where he left off; a self [she] was not and a self [she] did not become [...] qualified only by immediacy.”\textsuperscript{170} The mental health community has a tendency to merely provide problem-focused counselling that assumes that the cause of the individual’s so-called despair (unhappiness) is due to her an external event impinging on her otherwise stable state of being. The alternative available individual is the psychiatrist doling out prescriptions to physically treat the imbalance of the mind when what is needed, according to Kierkegaard, is a physician of the soul being able to diagnose the client as being in the state of despair and providing philosophical counselling in an attempt to provide the environment to cure the individual’s sickness of the soul. If this help fails to arrive then the

\textsuperscript{167} Ibid.

\textsuperscript{168} Ibid.

\textsuperscript{169} Ibid., XI 164.

\textsuperscript{170} Ibid., XI 165.
individual will remain living but the individual claims that she “will never be [her]self again,”\textsuperscript{171} at least her baseline self. As a result, she will merely go through the actions of living and interacting as one of society’s citizens but will remain not only in a state of ignorant despair but will continue to be dissatisfied and unhappy by society’s standards as well.

Kierkegaard also refers to another category of despair: in despair to will to be oneself. The individual who is in this state of despair has ascended past the baseline and has discovered why she does not want to be herself. Ironically, the individual has gained a sense of the eternal self but “misuse[s]”\textsuperscript{172} this awareness to try to establish a self without the aid of the eternal thereby attempting to become a single creator of the self rather than a co-creator. The individual is close to the truth yet she defies the eternal and instead of beginning with her present self and working towards establishing her authentic self, she attempts to manipulate and create an ultimate form. And so, the individual has risen to the level of the intellectual mode but instead of taking part in the conscious act of philosophy, she decides to place herself at the pinnacle of actualization and desperately seeks to singly achieve this vision of the self. As a result, “rather than to seek help, [she] prefers, if necessary, to be [her]self with all the agonies”\textsuperscript{173} of not being able to achieve such as state. This individual is focusing on quest to obtain the self (similar to philosophism) rather than on the experience and development of the self that is gained through true philosophy. The ideality of the self held by the individual is a perversion of true philosophy and becomes “demonic” in nature thereby plunging the individual back into the survival mode. This descent is similar to the individual in a state of despair in weakness. Both have a sense of desperation to

\textsuperscript{171} Ibid.

\textsuperscript{172} Ibid., 178.

\textsuperscript{173} Ibid., 182.
seek an idealized, yet inaccurate, depiction of the self and so individuals in both categories remain a slave to the corrupted values of society or the imagination (that often translates into new values within society) yet one remains enslaved out of ignorance and the other out of defiance.

*The Masses within the Matrix*

Despair is universally present in the citizens of society but unfortunately, “most men live without ever becoming conscious of being destined as spirit”\(^{174}\) and until an individual who has “so deep a nature” can honestly and “without affection”\(^{175}\) can admit to saying that they are in despair then they are burdened to living a life built on temporal happiness and being “deceived by life’s joys”\(^{176}\) until they can become conscious as spirit. Society’s masses have been deceived to partake in and seek out everything of a temporal nature within their secular life. The masses move like cattle toward the temporal feed lot that seems to emanate promises of happiness but lack any concept of individual or internal awareness that is necessary to rise above the herd. The individual is no longer an individual and the goals are moulded by the values of the secular society to such a state that any notion of despair “so hidden in a man that he himself is not aware of it.”\(^{177}\) According to Kierkegaard, the cure for despair is “simply to die, to die to the world”\(^{178}\) thereby removing oneself from the temporal world by taking part in philosophical counselling.

*Conclusion*

\(^{174}\) Ibid., XI 140.

\(^{175}\) Ibid.

\(^{176}\) Ibid.

\(^{177}\) Ibid., XI 141.

\(^{178}\) Ibid., XI 118.
Kierkegaard does not, and does not claim to provide a step-by-step self-help book like the quick fixes within the rest of society. Instead, he proposes that the individual can create her own concept of her true self in relation to God through a process of self-awareness and an inner dialectic that is guided with the help of the fellow philosopher. Part of Kierkegaard’s frustrating nature as a philosophical author is his propensity for asking questions but not necessarily giving the answers. This provides an opportunity for philosophical counselling to flourish. Philosophical counsellors wish for the individual to experience despair on a profound level and to continue her ascent to self-actualization while also providing the counsellor with the opportunity to continue to strive in her own journey as the fellow philosopher. The goal is not to provide the answers or be the authoritative teacher but merely interact with one another and take part in a one-on-one dialectic to encourage inward reflection and therapy of the soul.
SELECTED BIBLIOGRAPHY


http://dx.doi.org/10.1080/03069880050119028 (accessed September 14, 2010).


De Tocqueville, Alexis. Democracy in America.


Walsh, Robert D., “Philosophical Counselling Practice.” Janus Head 8, no. 2 (2005): 497-508.