

BECOMING: AN EXISTENTIAL-DEVELOPMENTAL UNDERSTANDING OF HUMAN DILEMMAS AND EXISTENTIAL PSYCHOTHERAPY

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Abstract

In this heuristic project developmental theories and existential concerns are synthesized in an effort to explicate human dilemmas and existential psychotherapy. Developmental themes and ontological givens create a dialectic between: need for stability/ continuity with change/ impermanence; separateness/ individuation with need and desire for connectedness; efficiency/ confidence with insecurity/ diffidence. These dilemmas are integral to being human and are re-negotiated throughout life. This existential-developmental view is also linked to psychotherapy. A safe space and the presence of a caring, empathically attuned, open and non-imposing therapist can facilitate the process of “authentic historicalness”.

Key words: Existential psychotherapy, human development, ‘becoming’, ‘oistros’, thrownness, authenticity.

Introduction

The Greek philosophical heritage has influenced greatly many important thinkers both in philosophy and psychology, like Heidegger, Camus, Rollo May, Irvin Yalom and many more. The current article is an attempt at integrating this heritage with developmental theories and existential concerns. It is a personal synthesis that is the result of a life long struggle to make sense of and accept my thrownness in the world. Although born with a chronic hereditary blood disorder that, at the time I was growing up, was considered fatal by adolescence I am still alive and creative. What are the factors that contributed to coping with the adversities posed by physical limitations and social norms? Would I be the same person if I did not have to live with the reality of death from a young age? These and many more questions prompted the exploration of developmental issues and their integration with existential concerns.

In the process of understanding and integrating my lived-experiences with theory I became aware of a number of themes that arise from certain developmental/existential milestones and the dialectic that is created within them. It is suggested that such “primary dialectical tensions” are: security and trust formed in a stable and consistent attachment in dialectic with ruptures, uncertainty and unpredictability of others and life; desire for independence, autonomy and for being one’s own true self in a constant dialectic with need of, dependence on, and desire for connection with others; growing mental and physical capacities for self-mastery and confidence in a dialectic with feelings of shame, self-doubt and diffidence. Finally, as my experience as a therapist grew, I realized that there is a parallelism between

our developmental journey and the psychotherapeutic process. Both the creation of the framework, the safe space of therapy, as well as the creation of the therapeutic alliance are discussed in relation to this this existential/ developmental perspective.

The importance of death awareness

Death awareness provides us with this kind of resolution that dispels all accidental and provisional possibilities and facilitates living authentically in our specific situation. The constant threat of death in my life has proved to be an important force pushing me to do the best I can and never procrastinate working towards what I desire. The awareness that time is limited and precious often drives me into ‘oistros,’¹ being as creative and productive as I can. Thanatos, our being-towards-death, signifies not only the final departure from life but also the constant losses and separations that we experience throughout life. Development is a continuous process of separations and betrayals if we are to move towards a greater state of individuation. Becoming our own unique being and standing-out (exist-ere) on our own require this kind of betrayal, of often leaving behind, our loved ones. Dealing with separations and losses and accepting our finitude are definitely major challenges that are in a constant dialectic with living, loving and connecting despite the danger and pain involved in losing a loved one.

The current pandemic has shaken the whole world and is rapidly changing our everyday way of being-in-the-world. How we are changing and what these changes will bring is probably too early to say but one thing is obvious: we are all forced to see and experience the uncertainty and fragility of life. We are forced to become aware of the impermanence of life and of the effect that our actions have on nature, on others, and on the world we live in. It is hard to deny the ever-present threat of death and the importance of our connection to others. For most people I know the pandemic and especially the lockdown have highlighted the importance of missing out on their relationships. This inter-relational experience of the world and its importance for the process of ‘becoming’ will be the main focus of this article.

Gignesthai and Becoming a Person

The name of the Hellenic Association for Existential Psychology² is “gignesthai”. This word is derived from the Greek verb ‘γίγνομαι’ and can be translated as ‘I become.’ However, it is in the infinitive and thus means ‘to become.’ We often say that we are «εν- τω-γίγνεσθαι» which implies ‘the process of a continuous becoming,’ or the constant ‘birth of being.’ This important concept emerged primarily from Greek philosophy and especially from the writings of Heraclitus. Heraclitus who is believed to have been born in Ephesus in approximately 535 B.C. was a pre-Socratic philosopher who was also called ‘The Obscure’ due to the paradoxical nature of his philosophy. He is famous for a number of aphorisms which exemplify his basic belief in ever-present change. Some such sayings are: “There is

¹ ‘Oistros,’ or zest for life, is a concept that arose from Greek poetry and literature, see Georganda (2020).

² See The Wiley World Handbook of Existential Therapy (Georganda, et.al., 2019a).

nothing permanent except change,” “Everything flows, nothing stands still,” “no man ever steps into the same river twice, for it’s not the same river and he is not the same man.”

This notion of constant change, of a continuous ‘becoming’ has great philosophical as well as psychological implications. It presents us with the great challenge of stability, which is so vital for our feelings of safety, as opposed to the insecurity and fear of unpredictability. Uncertainty, although an integral part of life and of living (Spinelli, 2007) is often unbearable, as the current covid19 situation has made so apparent to all of us. How can we feel safe in an uncertain and unpredictable world? What are the resources needed in order to cope with this ever-present change?

Although we are in a constant flow and process of becoming, creating our self every day and evolving into the being we are today, we have a sense of continuity as the “going-on-being”³ that we are. This sense of continuity and sameness we experience as stability. It is usually at times of contemplation that we realize how much we have changed over time. I often think of this paradox as similar to our experience of the earth. Our planet earth is constantly revolving around its axis and around the sun and is never still. However, we experience the ground as stable and unmovable. If we were feeling the constant movement, we would be dizzy and unable to stand up, as is our experience while on a boat in a turbulent sea. Similarly, human beings need to feel stable and safe in order ‘to stand up,’ to be functional and not become incapacitated by the ‘dizziness’ of life.

It is my understanding that this feeling of stability, in the midst of constant flow, is the result of our ability to regulate our affect and our self-state. We now know from neurobiological research and from affect regulation theories (Hill, 2015, Schore, 1994) that this ability for self-regulation and the basic sense of trust and security in our world and in others is linked to early attachment patterns (Ainsworth, et al., 1978). From very early on (before such research evidence was available) I was drawn to attachment theory due to my personal experience. It described the fortunate side of my thrownness in life. Being born in a family where I received love and acceptance at a time when my disease was considered by society a stigma for the whole family was great fortune. I also realized that having a strong, loving and caring mother that could regulate her own affective state in the midst of great adversities was a great gift for my own self-regulation. Our primary relationship with ‘mother,’ or other caregiver, is very important for our ability to regulate our affective states, enabling us to maintain a certain balance and a continuing sense of self in the midst of turmoil. It is my belief that the presence of a caring, empathic and self-regulated therapist can play a similar function in later life.

Towards An Existential Understanding of Human Development

Since I was an undergraduate, I was very interested in developmental psychology. I was fascinated by the different developmental theories and was intrigued by all the different

³ “Going-on-being” is a “sense of continuity of one’s own being,” a term used by Winnicott (Craig, 2008, p. 257).

aspects they presented. Each one seemed to have an impact for understanding myself and how I grew up. While in therapy I often wondered if anything was ‘truly mine’ or if I was just the result of my upbringing. I had a great distaste for the idea that I was determined, especially because of my disease and the popular belief that I was doomed to do nothing much with my life and of course die early. Fortunately, my family did not adhere to this common view and I passionately believed and wanted to prove that I was free to choose my life. But was I and to what extent? In this quest for self-understanding and for “separating what was truly mine and what not” (what a foolish idea), I decided to combine as many developmental theories as I knew at the time in order to solve the riddle. Of course, now I know that nothing is mine and everything is mine; I am an amalgamation of everything.

In the midst of this struggle, I created the conceptual metaphor of the “DNA of the Soul”⁴ to capture the dialectical nature of our lived experience over an ever-unfolding life span. I still consider this metaphor and the synthesis of different theories valuable for understanding human existence and growth. It encompasses a number of theories, such as those of Bowlby, Ainsworth, Mahler, Winnicott, Freud, Erikson, Piaget, Maslow, Rogers, Yalom and Jung. I chose the DNA molecule for a number of reasons. The metaphor of the DNA seemed to depict the sort of engraving of lived-experiences that form our psychological or ‘psychic DNA,’ i.e., those well-established ways of responding to and relating with life and others that seem hard to change. The goal of much of therapy is to unravel, understand, accept and maybe alter these well-ingrained patterns. Furthermore, it prompted the visualization of a spiral movement of two intertwining strands, coiling the one around the other. I thought this to be a more accurate representation of development than linear models of the stage theories. Finally, the two strands of DNA run in opposite directions to each other, and although antiparallel, are constantly interrelated.

Our journey through life often presents us with some universal themes or challenges that unfold as we grow older⁵. The outcome of our struggle with these antithetical issues ranges from a ‘positive’ self-enhancing pole to a ‘negative’ self-inhibiting side. These two strands are in a constant dialectic with one another as is depicted by the molecule⁶. These paradoxes exist on a continuum and throughout life we are negotiating our position, formulating our self-concept and self-understanding-in-relation-to-others and the world we live in. As a result, we experience these “**primary dialectical tensions**”: feelings of trust, safety and continuity as opposed to suspiciousness, insecurity and impermanence; our desire for independence and separateness in a dialectic with our need for and desire to be close to others; feelings of self-worth and sufficiency with feelings of self-doubt and diffidence.

⁴ For more information see: Georganda, E. (2007) The DNA of the Soul: Integrating developmental issues with existential-humanistic theory. *The British Journal of Psychotherapy Integration: The Integrative Project in Practice* 4(1): 4-12.

⁵ See: Georganda, E. (2020a). Becoming: An Existential/ Developmental Understanding of Human Existence & Growth. *Existential: Psychology and Psychotherapy* 13: 97-116.

⁶ For a heuristic schema of the proposed model see Georganda, E. (2016). Thrownness, Freedom and the Will for Authenticity: An Existential – Developmental Approach to Psychotherapy. *Journal of the Society for Existential Analysis* 27(2): 261-276.

Development and the Self/Other Dilemma

In reviewing the developmental unfolding of our life story and our struggle with these pivotal themes, we could say that, when we start out in life, we are physically separated from mother by cutting the umbilical cord. At that moment we experience the first shock of separation and of ‘having to make it on our own.’ We are, of course, in an undifferentiated and fused psychological state where our understanding of the world is based solely on our senses and kinesthetic experiences as in Piaget’s (1972) “sensorimotor stage.” What happens in our relationship with our primary care taker will be processed on this nonverbal affective level that is the initial building-block of our self-concept and our intersubjective experience of the world. The process of developing and growing into the distinct and separate, although inter-related⁷ being that we are, is a long one, filled with separations, losses and gains which result in us constantly becoming who we are in the now. Our cognitive maturation will allow us to understand that self and other are separate from very early on, at around the 6th month for Piaget (1972) the time at which Freud (1973, 1976) also suggests we begin to formulate our ego. With sufficient “mirroring” (Winnicott, 1971) we will be able to outgrow the normal narcissistic, self-indulgent state of infancy and, equipped with new cognitive capacities, we will be able to relate with ever-increasing comprehension of the perspective of the other. This process of greater intersubjective awareness will also refine our empathic understanding of other beings in our world.

Becoming our own competent, self-sufficient and fulfilled being is a life-long process that can be assisted or hindered by the presence of others and by unexpected life events. This developmental understanding of our journey through life is an attempt to accentuate some of these potentially enhancing or inhibiting elements of our relationship with others. Having been ‘thrown’ into a set of circumstances (biological, social, cultural, environmental, etc.) that are not of our choosing, our existence and survival initially depend upon the presence of another human being. The quality of this relationship is important for our physical and psychological growth. “Good enough mothering” (Winnicott, 1971) will ensure not only the satisfaction of basic physical needs (shelter, food, warmth) but also the necessary psychological needs (safety, stability, protection) that are primary in Maslow’s (1970) “hierarchy of needs.” An emotionally attuned and reliable care-giver will provide the “secure attachment” (Bowlby, 1969, 1973) that we now know will affect not only bonding and the establishment of trust (Erikson, 1963) in others and life (with the attainment of the “virtue of hope”) but also the functioning of our brain and autonomic nervous system (Siegel, 1999). As a result of a secure attachment, we are able to regulate our affect and self-state and thus respond to and cope with crises in more functional ways.

As we grow older, ‘good enough mothering’ will also allow for the breaking of the symbiotic bond (Mahler, et al., 1975). The infant and the toddler develop both physically and cognitively and are capable of a greater degree of independence that needs to be fostered by the approving and encouraging stance of the caretaker. The ability to walk and talk signify the infant’s greater capacity for autonomy which, if blocked by the restrictive, overprotective

⁷ This is my understanding of Yalom’s (1980) notion of “existential isolation”.

or critical presence of another, may create feelings of shame, doubt and fear towards this emerging potential. Our ability to slowly take over our life and learn how to ‘stand on our own two feet’ starts from early on. It is difficult to understand how we expect teenagers and young adults to be responsible, competent and self-sufficient beings if this process of maturation has been hindered. Our sense of self-mastery, self-reliance and self-esteem are constantly practiced and developed. The need for approval, for being liked and belonging are powerful throughout life. It is much later in life that the opinion of others for our self-image loses some of its significance for our self-perception, although I wonder if it ever ceases to matter.

Resilience and ‘Becoming’

Resilience theory views self-efficacy, mastery, self-regulation and the ability to continue thinking and planning under stressful situations as important protective factors (Masten and Obradovic, 2008) for coping under stress. Reaching the successful resolution of developmental dilemmas, such as those proposed by Erikson’s (1980) psychosocial theory, will lead to this ‘positive’ self-enhancing strand of our ‘psychic DNA’ that seems to coincide with the resilient qualities proposed by Richardson (2002); faith, optimism, hope, self-determination, self-control, excellence, gratitude, wisdom are all qualities that are not only helpful for dealing with stress and life crises but are suggestive of general mental health and well-being.

Our self-concept and our worldview are constantly evolving through the process of assimilation of and accommodation to life experiences. Our cognitive and physical maturation need to be accompanied by emotional maturation, i.e., our ability to handle developmental/existential demands and crises. Some of these demands center around such themes as: our connection to others, loving⁸ and caring for others instead of isolation⁹ and social distancing; dealing with separations, losses and conflict rather than hiding and avoiding them; managing increased responsibilities and commitments instead of shying away from them; attaining greater self-mastery, self-control and self-reliance as opposed to feeling inadequate and insecure; accomplishing a sense of fulfillment and satisfaction with our life instead of feelings of regret and sorrow for lost opportunities. It is in these challenges and in our ability to do the best that we can that ‘oistros’¹⁰ plays a significant role. It provides us with this powerful energy that propels us towards life enhancing choices, living life and everyday as if it is the last and to the fullest possible, like the hero of Kazantzakis, Zorba.

In an expanded view of Maslow’s hierarchy of needs (see Figure 1), it is proposed that self-actualization can be viewed as a step towards greater self-integration and wholeness. The yin-yang symbol is chosen in order to depict the kind of integration suggested by Jung (1966) in his idea of wholeness as the synthesis of opposites. Light and darkness, day and night, are part of life and of our everyday living. Similarly, we are moving between two

⁸ Connecting not out of need but out of pure interest and desire, as Fromm (1963) suggests in his book *“The Art of Loving”*

⁹ The “interpersonal isolation” referred to by Yalom (1980)

¹⁰ See Dallas, et.al. (2019). *The Myth of Zorba the Greek and the Existential Concept of Oistros*.

poles of ‘openness –closedness,’ constantly finding and losing meaning and balance. This pyramid can also be connected to Emmy Van Deurzen’s (2004) four dimensions of existence. We start from the physical dimension that relates to our basic needs for survival, proceed to the social dimension where belonging and the view of others takes primacy, to the personal level in which we struggle more with our selfhood, to the spiritual dimension of human values and meanings.

In this conceptualization of ‘becoming,’ of an existential understanding of development, time and timing are crucial elements. Human beings are historical beings. We are born with numerous givens, with limitations as well as capabilities and possibilities. Each one is as unique as his or her life story, yet we all share the same ontological or existential givens. As Erik Craig (1992) writes, it is a miracle that there is Being and that there is this kind of being that we call human being along with numerous other beings. This is the miracle, that we are born completely helpless but each of us has the potential to become a functional, mature, independent, self-sufficient and competent kind of being. It is also possible that the individual will become dysfunctional and unable to tend to his or her needs and capabilities. Of course, there is also a wide range of possibilities, as many as there are human beings, in between these two poles. What happens in the process of our developmental unfolding of possibilities is a result of numerous biological, sociological, cultural, ecological, and/or purely accidental parameters. However, our relationship to others is one of the most important contributing factors. It is the writer’s belief, from personal experiences already related but also from many life stories that I have heard as a professional, that adversity and life challenges are not the decisive factor in maladjustment. Indeed, quite often adversities can be a way for building the resilience, so needed for coping with life. Rather, the decisive factor is our relationships with others; primarily our significant others, family members, teachers, mentors and hopefully therapists.

The Therapeutic Experience and ‘Becoming’

In recent years, as my experience in practicing psychotherapy grew, I became aware of the similarity of this Existential-Developmental understanding of existence and human growth to the process of psychotherapy. The commonalities lie not only in the creation of the psychotherapeutic alliance but also in the stance of the therapist, the establishment of the framework and the use of the phenomenological method. Phenomenology requires that the therapist remains open to discover and learn from and through the interaction with the other; to put in parenthesis his or her views and understanding of the world in order to curiously and honestly explore the world of the other. This respectful and empathic understanding and reflecting of the other’s worldview resembles the process of “mirroring” of the “good enough mother.” Similarly, one of the primary tasks of the therapist is the establishment of the framework of therapy as a “holding environment” in which one is to grow and, as a young man I used to see in therapy told me in our closing session, “*Your non-imposing presence gave me the space to flourish.*” This ‘non-imposing presence’ implies a great respect for the autonomy of the other. As in early life, this autonomy needs to be fostered, encouraged and supported throughout therapy. Thus, although the therapist must be present

with his or her whole being for the other, the therapist also needs to trust the process and the person in therapy to dare to challenge him- or herself and, thereby, to grow and flourish.

There are two pillars of psychotherapy: the framework and the therapeutic alliance. Psychotherapy most often takes place in a secure and private space and is guided by certain principles that give it stability, in terms of time, duration, frequency and reimbursement. The therapist is called upon to follow an ethical code that maintains confidentiality and serves the best interest of the client. All these create the necessary safe space in which therapy can take place. Of course, more important than the framework per se is the presence of the therapist. The creation of a trusting, caring and secure relationship is vital for starting both our journey in life and our therapeutic endeavor. As Yalom (1980) mentions, it is the relationship that heals. It is the establishment of a trusting and caring connection that allows the person in therapy to reclaim his/her real self, as Paul Stern (1973) writes in his book "In Praise of Madness: Realness Therapy-The Self Reclaimed".

A young woman I used to see for approximately seven years offered me a letter on our termination date. She wrote:

Initially I want to thank you for the biggest and most important thing you helped me acquire. My self. I feel I am. I feel who I am in all the years of my life. I have me with me all the time. I can see me through my eyes and I can feel proud of me and compassion for me. This is the greatest present for me and I have achieved it mainly through our work and our relationship. I feel that no matter what happens I will have at least me, although I am very scared of what life will bring. Because of this feeling of being me the continuous agony and anxiety I experienced since I was a child is gone. Now it comes and goes, like everything else. I can stay by myself, I can be with others, I can enjoy. I can be in the present, in the now, in the relationship and especially in the relationship with myself.

The therapeutic relationship creates a new experience of relating with another and offers the "corrective emotional experience" that Franz Alexander (1980) had suggested. The therapist's own ability for self-regulation and affective expression can serve as a different role model, but also creates a new form of intersubjective experience that will enhance the ability of the client for affective and self-state regulation. Furthermore, given "that emotion is the source of a person's true being" (Cates, 2011, p.514) and our "subjective emotional experience that evolves, through a relational developmental process, from purely bodily states to those that encompass language" (p. 513) much of therapy is related to this process of making verbal what is unspoken. To put into words our core affective experiences, our inner most well-hidden emotions requires both a "sanctuary" and the therapist's "presence" as suggested by Erik Craig (1986) in his article "Sanctuary and presence: An existential view of the therapist's contribution." In ancient Greece in the healing temples of Asclepius, the elements of privacy, confidentiality and sanctity were essential for the creation of this *Avato*, or sacred place. The person who comes to therapy is in a vulnerable position and needs to feel safe and protected in order to open up his or her world to the therapist and have the opportunity to experience compassion and understanding.

The non-judgmental empathic attunement of the therapist and “the *subtextual dimension of the affective bond*—the rich world of emotional communication expressed, in part, through gaze and gesture—provides a therapeutic pathway for moving disarticulated affective experience into the constitutive dyadic dialogue” (Cates, 2011, p.512). The importance of this is two-fold; in the primary relationship with the care-taker it is often these unspoken attitudes, glances and nonverbal communications that are traumatic and really hard to detect as emotional abuse; in the therapeutic relationship it can often go unnoticed by the therapist but will be quickly picked up by the client. It is in this very fine area of ‘presence’ that therapists need to be more attentive. Erik Craig’s (2012) suggestion of a “disciplined original presence” is an expanded and more inclusive understanding of the concept of presence, to which I would add “**disciplined original and non-imposing presence.**”

The idea of ‘discipline’ encompasses a wide range of abilities and characteristics of the therapist, such as: the ability to maintain the framework of therapy, to keep the boundaries and to set the rules while remaining open and caring; to be empathic and emotionally attuned while making quick calls as to the appropriateness and timing of “self-revelations”; to understand when and whether to make a “self-disclosure”¹¹; to maintain self-balance when an issue provokes his or her own vulnerabilities; and to remain affectively regulated in times of crises are just a few of the many challenges of the therapeutic world to which the therapist needs to be able to respond. These challenges make obvious the need for personal therapy of the therapist and of supervision.

The idea of an ‘original presence’ conveys a stance characterized by genuineness and authenticity. This is discussed in many humanistic approaches. It is, however, difficult to attain. The difficulty is related to these “subtextual dimensions of the affective bond” that we referred to earlier. Human beings, regardless of age or culture are able to detect emotional facial expressions of fear, anger, disgust, sadness, surprise, etc. in a matter of milliseconds. This makes genuineness a difficult undertaking if we are not truly authentic in our attitude towards the other. Our faces and our bodily postures often betray our true feelings and thus ‘original presence’ and the attainment of empathic attunement can be difficult endeavors.

Finally, the therapist’s consistent, caring, respectful and non-imposing way of being-there-with-the-other seems to be important for the creation of the therapeutic alliance and the outcome of therapy. The person in therapy needs to experience the open, phenomenologically curious glance of the therapist in order to unravel his or her life story. This trustful unraveling of one’s life story leads to an increased openness towards life, others and the world of possibilities. As is mentioned in “Choosing one’s Fate: A Re-reading of *Sein und Zeit* (section 74)” by Sheehan and Painter (1999), “thrownness provides the possibilities from which resolution chooses” (p.64). Thus, the question of “choosing our fate” is more related to the acceptance of our thrownness, of the conditions in which we have found our existence thrown into, rather than an actual choosing of circumstances.

¹¹ “Self-revelation”: the therapist relates his/her experience of the other in the therapy room; “self-disclosure”: the therapist relates personal information (Craig, 2019, personal communication).

Therapy with this existential-developmental understanding of thrownness can provide the 'returning and resolving' that will free up inherited possibilities. In 'choosing our fate', accepting, or even 'loving our fate', as in *Amor Fati* (Nietzsche, 1954), we are making our thrownness our own. This process of making our thrownness our own (Georganda, 2007) has numerous consequences. It can liberate inherited potentialities and enhance one's 'oistros' or zest for life; it can enhance authenticity as in: "the existential meaning of authenticity is in the first four letters 'auth' as in authorship. ... What makes an action authentic is whether it is chosen and owned in full knowledge of the situation and the potential consequences. Authentic living is aware living." (Deurzen and Adams, 2011, p.92); but more importantly this "authentic historicalness" can lead to a stance of openness towards life where, by "embracing the powerlessness of thrownness" (Sheehan & Painter, 1999, p.80) we can remain open both to fortunate and unfortunate life events. Understanding, accepting and even more valuing both the fortunate and unfortunate elements of my thrownness-in-the-world can serve as a testimony to the feasibility of *Amor Fati*.

As a closing remark, I would like to let the words of a 40-year-old man, whom I worked with for three years, speak:

The 'holding environment' that you provided for me, helped me to overcome a crippling depression and come to terms with my past. I do think that attaining a relationship of mutual trust and caring between us was essential for the establishment of a profound and successful therapeutic process. These aspects of our relationship gave me consolation and helped me deal with my emotional and mental suffering. Your sensitivity and understanding allowed me to share my lived-experience with you, and helped me summon the courage to dive into the difficult process of honest confrontation of reality and myself. ... I distinctly remember a time in our therapy, when I was once more considering taking antidepressants to find some relief, because I felt too weak. You gave me the option to do so, but also told me that what you saw in me was a strong person. Your trust helped me restore my lost trust in myself. This was my small leap of faith. I think it was a pivotal moment in our therapy and allowed me to persevere and continue on a more authentic path. ... In the sense of isolation that I experienced, - due to my unpopular worldview and inability to subscribe to an immortality project - what gave me comfort, was your genuine interest and openness towards the thoughts and feelings I brought to the therapy room. I believe this helped me deal with my lack of self-confidence and made me feel better in my own skin. ... This email spontaneously turned into a reflection on our therapeutic relationship and I guess it gave me an opportunity to express how thankful I am for it.

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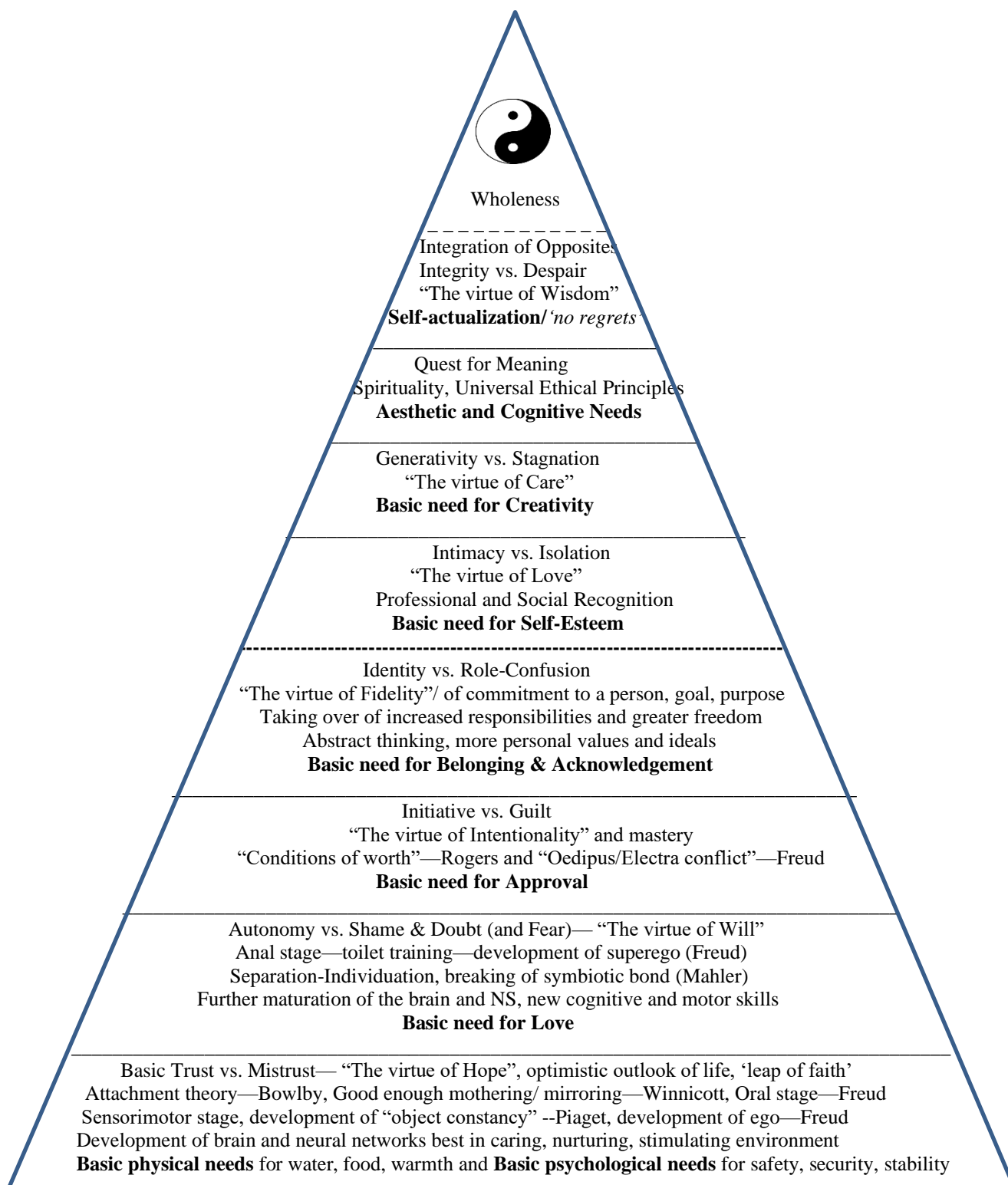


Figure 1: The Expansion of Maslow’s Hierarchy of Needs