Relevance and Application of Logotherapy to Enhance Resilience to Stress and Trauma

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Logotherapy has been used as a therapeutic intervention for individuals who struggle with a host of medical, behavioral, health, and social problems. For example, logotherapy has been described as helpful for individuals living with schizophrenia, mood disorders, anxiety disorders, posttraumatic stress disorder (PTSD), alcohol use disorders, and personality disorders, as well as cardiac illness, prolonged grief, and chronic pain (Marshall and Marshall 2012).

One reason that logotherapy may have positive effects on such a broad array of problems may be related to its impact on the stress response, and on one's ability to tolerate adversity, to build resilience, and to grow from stressful and traumatic experiences. Chronic stress that is poorly regulated is known to exacerbate a host of medical and psychological conditions and disorders (McEwen 2007).

In this chapter, we discuss how logotherapy can help to regulate chronic stress by fostering resilience and posttraumatic growth. As noted by Ann V. Graber, "Logotherapy attempts to help the client get in touch with his reservoir of strengths within, and to apply the power of the human spirit to overcome the distress which follows in the wake

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of human suffering in any category … Logotherapy focuses less on the origin of a given cause of suffering and more on overcoming it (Graber 2004, 130) … and is built to build on client strengths rather than 'pathology'" (Graber 2004, 100).

Definitions

Definition of Resilience

There is no one universally accepted definition of resilience. The American Psychological Association defines resilience as "the process of adapting well in the face of adversity, trauma, tragedy, threats or even significant sources of stress." Other definitions of resilience include the capacity of a dynamic system to adapt successfully to disturbances that threaten the viability, function, or development of that system; the process of harnessing resources to sustain well-being; robust psychobiological capacity to modulate the stress response; and reintegration of self that includes a conscious effort to move forward in an insightful integrated positive manner as a result of an adverse experience (Southwick et al. 2014).

Definition of Logotherapy

Logotherapy may be understood as therapy that seeks to heal through access to meaning and purpose in spiritual terms. In his book, *The Doctor and the Soul*, Viktor Frankl introduced *logotherapy* as "psychotherapy in spiritual terms … Logotherapy must *supplement* psychotherapy; that is, it must fill the void [by inclusion of the spiritual dimension] whose existence we have mentioned. By the use of logotherapy we are equipped to deal with philosophical questions within their own frame of reference, and can embark on objective discussion of the spiritual distress of human beings suffering from psychic disturbances" (Frankl 1986, 17).

To access meaning the logotherapist focuses on the noetic dimension, the dimension that contains our healthy core, where can be found such uniquely human attributes as will to meaning, ideas and ideals, creativity, imagination, faith, love, conscience, self-detachment, self-transcendence, humor, striving toward goals, and taking on commitments and responsibilities. The logotherapist mobilizes these innate human qualities in therapy. As noted by Joseph Fabry, in logotherapy the human being is seen as a unity comprised of body (soma), psyche (intellect and emotions), and spirit (noös). To emphasize this unity or oneness, Frankl speaks of "dimensions of human existence." Our body, psyche, and spirit are three inseparable dimensions, unified. If one is disregarded, we do not get a complete human being but a shadowy two-dimensional projection. Disregard the

spirit and you get a shadow, a caricature, an automaton of reflexes, a helpless victim of reactions and instincts, a product of drives, heredity, and environment (Fabry 1975, 20).

Determinants of Resilience

A myriad of genetic, developmental, biological, psychological, social, and spiritual factors have been associated with resilience. For example, from a biological perspective, resilience refers to the capacity to modulate and constructively harness the stress response enabling one to bounce back from adversity (Southwick et al. 2014). As previously described, failure to adequately modulate the stress response can dramatically impact physical and mental health. Stress, if chronic and poorly managed, can contribute to a broad array of illnesses such as diabetes, heart disease, gastric ulcers, asthma, and depression (McEwen 2007). In this discussion we focus on some of the psychosocial factors that have received the greatest support from research as having an effect on the stress response. These include positive emotions and optimism, active problem-focused coping, moral courage and altruism, attention to physical health and fitness, capacity to regulate emotions, cognitive flexibility, religiosity/spirituality, high level of positive social support, and having a meaningful mission (Southwick and Charney 2012b). While many of these psychosocial factors have been linked to reduced symptoms of traumatic stress, as well as positive mental health and resilience, they do not operate in isolation, but, instead, typically interact with other factors.

Optimism

Optimism and Resilience

Optimism refers to the basic belief that the future will be bright and that there is light at the end of the tunnel. A large scientific literature shows that positive emotions and optimism are associated with good physical and mental health. For example, compared to pessimists, optimists have been shown to develop fewer stress-related psychological illnesses (e.g., depression and PTSD) after being exposed to missile attacks (Zeidner and Hammer 1992), better physical health after cardiac surgical procedures (Giltay et al. 2006), and increased immunity from infectious disease (Cohen et al. 2003). There is even evidence that optimists tend to live longer than pessimists (Danner et al. 2001).

Barbara Frederickson, as part of her "Broaden and Build" model of positive emotions, found that positive emotions tend to broaden the scope of one's visual, cognitive and behavioral focus, with a resultant increase in flexibility and creativity, as well as in the ability to integrate information (Fredrickson and Branigan 2005).

Evidence also suggests that compared to pessimists, optimists tend to be more active in their attempts to solve problems and that they tend to experience life as being more meaningful, both of which have been associated with resilience (Ju et al. 2013; King et al. 2006).

A number of researchers have suggested that resilience is most closely associated with optimism that is realistic, rather than blind or "rose colored." As noted by Reivich and Shatté (2003) realistic optimists do not ignore relevant negative information but instead they pay close attention to such information. However, unlike pessimists, realistic optimists tend to disengage rapidly from negative information and can turn their attention to potential solutions.

Optimism and Logotherapy

Viktor Frankl saw optimism as a source of strength and embedded a positive approach to life at the very core of logotherapy. As noted by Frankl, "Rather logotherapy is an optimistic approach to life for it teaches that there is no tragic or negative aspects which could not by the stand one takes be transmuted into positive accomplishments" (Frankl 1988, 73). When discussing the tragic triad, he wrote, "One is and remains optimistic in spite of the "tragic triad" as it is called in logotherapy, a triad which consists of those aspects of human existence which may be circumscribed by: (1) pain (2) guilt (3) death… How is it possible to say yes to life in spite of all that? After all, "saying yes in spite of everything," presupposes that life is potentially meaningful under any conditions, even those, which are most miserable. And this in turn presupposes the human capacity to creatively turn life's negative aspects into something positive and constructive. In other words, what matters is to make the best of a given situation. "The best," however, is that which in Latin is called *optimum*—hence the reasons I speak of tragic optimism, that is, optimism in the face of tragedy…" (Frankl 2006, 136) As noted by Ann Graber (2004), logotherapy takes a pragmatic approach, in that its optimism is realistic in nature and the insights gained through reflection should be applied in the daily tasks of life.

Facing Fear

Facing Fear and Resilience

Fear has an enormous impact on how individuals conduct their lives. While fear is essential for survival, it can also constrict life or even become paralyzing. Learning to face fear is an essential skill for enhancing resilience. This is by no means easy but many techniques have been developed to help people confront and in some cases overcome their fears.

When confronted with danger, humans respond with an increase in hypothalamic pituitary adrenal axis and sympathetic nervous system activity, which assists in

fighting or fleeing from the danger. During the fight-flight response, increases in stress hormones and neurotransmitters, such as cortisol, norepinephrine and epinephrine, enhance the individual's capacity to focus on the dangerous stimulus, respond to the danger, and encode and consolidate the experience into memory. Elevation of stress hormones and neurotransmitters, particularly norepinephrine, generally increases consolidation so that memories of dangerous experiences tend to be remembered better than neutral experiences. These "over-consolidated" memories may be especially strong and sometimes unforgettable. While enhanced consolidation of memories for dangerous events has survival value, by making it more likely that the individual will remember what to avoid in the future, it appears that enhanced consolidation also contributes to intrusive traumatic memories that may haunt the survivor for years (for discussion see Southwick and Charney 2012b).

Just as people remember dangerous and traumatic events better than neutral events, they also remember the context in which the dangerous event occurred. Through the process of classical conditioning, sounds, sights, odors, time of day, weather conditions, state of physiological arousal, and other contextual stimuli become linked with the dangerous stimulus. In the future these contextual features, most of which were previously neutral in nature, may provoke feelings of fear by themselves. For example, if someone is almost killed by a shark while swimming in the ocean at sunset, he/she in the future may feel uneasy and afraid in the ocean or at sunset even when no real danger is present.

It is natural for people to avoid situations that make them anxious. However, by avoiding fear-conditioned stimuli, like the ocean in the above example, the individual cannot update or transform their fear-related memories. On the other hand, confronting fear can serve as a catalyst for growth and can potentially expand the range of opportunities in one's life.

Since avoidance is known to perpetuate anxiety disorders and disorders of traumatic stress, the psychotherapies that have proved most effective for treating these disorders (e.g., cognitive behavioral therapies, EMDR, systematic desensitization, and prolonged exposure) all involve some form of exposure to what is feared. Other practical advice for increasing resilience by learning to face fear comes from multiple sources including the US Military. Commonly cited tips for learning to face and deal with fear include viewing fear as a warning or guide rather than as something to avoid, acquiring information about what is feared; learning and practicing skills needed to master the fear, focusing on the ultimate goal or mission rather than the fear itself, viewing the confronting and overcoming of fear as an opportunity for growth; facing fear with friends and colleagues (for discussion see Southwick and Charney 2012b).

Facing Fear and Logotherapy

Logotherapy also addresses fear, particularly as seen in phobias and anxiety neuroses. For example, Frankl referred to the "fear of fear" and the "flight from fear." The phobic or anxious patient generally tries to avoid situations that increase anxiety.

Unfortunately, such avoidance results in "a strengthening of the symptom" or at least prevents the possibility of extinction.

To deal with the patient's fear, anxiety, and avoidance, logotherapists often take a paradoxical approach. The logotherapist advises the patient to exaggerate and actually wish for that which is feared. For example, if a patient is afraid of stuttering when giving a speech in public, the logotherapist might advise him/her to wish for and intend to stutter as much as possible in an upcoming speech. Frankl found that when a fear is replaced with a wish, "the wind is taken out of the sails of the phobia" (Frankl 1986, 224). In Frankl's words, "Conversely, if we succeed in bringing the patient to the point where he ceases to flee from or fight his symptoms, but on the contrary, even exaggerates them, then we may observe that the symptoms diminish and that the patient is no longer haunted by them" (Frankl 1986, 224).

As will be discussed later, the use of humor is typically a powerful element of paradoxical intention. With paradoxical intention and humor the individual detaches the self from anxiety and fear. "This procedure, however, must make use of the specifically human capacity for self-detachment inherent in a sense of humor… when paradoxical intention is used, the purpose is to enable the patient to develop a sense of detachment toward his neurosis by laughing at it, to put is simply" (Frankl 1986, 224–225). Paradoxical intention employs what Frankl referred to as "right passivity" because the patient ridicules his symptoms rather than trying to run away from them (i.e., wrong passivity)

Logotherapists can also use "dereflection" to help patients face their fears. With dereflection the patient learns to "ignore" fears or symptoms by focusing on the task at hand. Many individuals who fear a particular situation or encounter tend to focus, or hyper-reflect, on what can go wrong rather than on ways to cope with the feared situation. By focusing on how to meet a particular challenge or overcome a fear, the individual adopts an active problem-oriented approach to coping.

Values

Values and Resilience

For centuries scholars have written about the benefits of articulating and adhering to a core set of moral and ethical values. For example, the stoic philosophers placed great value on virtue and moral character, self-control, discipline, endurance and perseverance, courage, rigorous pursuit of worthy goals, attempting to be the very best, integrity, and dignity in the face of suffering. Many scholars believe that these values and virtues are associated with resilience and strength of character (Sherman 2005). For example, James Stockdale, author and senior commanding officer of the Hanoi Hilton, a notorious North Vietnamese prison that housed many American prisoners of war, had the following to say about integrity, "You can't buy it or sell it. When supported with education, a person's integrity can give him something to rely on when his perspective seems to blur, when rules and principles seem to

waver, and when he's faced with hard choices of right and wrong. It's something to … keep him afloat when he's drowning." The resilience-enhancing effects of adhering to and defending one's deeply held values and beliefs has been described by many former prisoners of war (Southwick and Charney 2012a). For example, Stockdale's directive to his troops to accept no special favors from the North Vietnamese and to refuse early release, unless all prisoners were released, provided great strength to prisoners who were tempted by their captors.

Perhaps the most admired of the moral and ethical values is moral courage. Rushmore Kidder (2006), director of the Institute of Global Ethics, has defined moral courage as, "standing up for values…the willingness to take a tough stand for right in the face of danger…the courage to do the right thing…the quality of mind and spirit that enables one to face up to ethical challenges firmly and confidently without flinching or retreating (Kidder 2006 72)." As described by Samuel Johnson in the eighteen century, moral courage is "the greatest of all virtues; because unless a man has that virtue, he has no security for preserving any other" (Boswell 1791). For Kidder, moral courage requires committing to a core set of principles and moral values, understanding that one is likely to face hardship or danger by standing up for these values, and being willing to endure the possible loss and hardship that may accompany taking a stand.

Values and Logotherapy

Frankl believed in the power of "universal" or "eternal values." Fabry (1975) referred to these values as "time tested rules of behavior" that reflected the "wisdom of the ages," such as love thy neighbor, honesty is the best policy, and do not commit adultery. Frankl also believed in a hierarchy of values that plays an important role in deciding how to act in situations where two or more universal values conflict with one another. Frankl (2006) himself had to create his own hierarchy of values when he realized that his wife, who was very attractive, might be faced with a choice to save her life by breaking her marital vows, or die at the hands of an SS officer by refusing to do so. He decided to tell his wife to "Stay alive at all costs. Go to any length to survive." In this way he placed the commandment not to kill over the commandment not to commit adultery.

Logotherapy also endorses three basic values as routes to discover meaning. These values have been referred to as the "Meaning Triangle." First: creative values, where the individual gives back to life by using their creativity, unique talents and strengths. One's specific occupation is irrelevant. What matters is how the individual "works, whether he in fact fills the place in which he has happened to have landed. The radius of his activity is not important; important alone is whether he fills the circle of his tasks. The ordinary person, who really masters the concrete tasks with which his occupation and family life present him, is, in spite of his little life, "greater" than and superior to a "great" statesman who may decide the fate of millions with the stroke of a pen, but whose decisions are unscrupulous and evil in their consequences (Frankl 1986, 41)." In other words, meaning can be fulfilled by

fully utilizing ones unique talents to engage in life. As Frankl put it, "Our aim is to help our patient to achieve the highest possible activation in life" and "In view of the task quality of life, it logically follows that life becomes all the more meaningful the more difficult it gets…" (Frankl 1986, 54).

The second basic value is experiential where the individual receives from the world and finds meaning through experiences with nature, religion, culture, truth, beauty, and love (Graber 2004). Experiential value is "realized in receptivity toward the world—for example—in surrender to beauty of nature or art." Examples include the intense "shiver of emotion" that one might feel when listening to a moving piece of music, looking at a great work of art, or walking through a forest.

Finally, the third basic category is attitudinal values, which can provide meaning even when one's life "is neither fruitful in creation nor rich in experience. The third group of values lies precisely in a man's attitude toward the limiting factors upon his life. His very response to the restraints upon his potentialities provides him with a new realm of values, which surely belong among the highest values. What is significant is the person's attitude toward his unalterable fate (Frankl 2006, 45)." Thus, in logotherapy the deepest and most noble meaning in life can be found in the attitude the individual takes toward unavoidable suffering. "The way in which he accepts, bears his cross, what courage he manifests in suffering, what dignity he displays in doom, is the measure of his human fulfillment (Frankl 1986, 44)."

In the philosophy of logotherapy, the human spirit is what makes us human, what makes us more than the sole product of biological, social and psychological drives. It is the defiant power of the human spirit, the *noetic* self, that "…has the power to rise above the afflictions of the psychophysical self (Graber 2004, 77)" even when the psychophysical self has become sick.

Altruism

Altruism and Resilience

Altruism, or concern for the welfare of others, has been associated with positive mental health, well-being and resilience. For example, researchers from the University of Massachusetts reported that social interest, a term closely related to altruism, was associated with better physical and mental health, reduced stress, better life adjustment, and less depression and hopelessness. They also found that both the receiving and giving of social support predicted better mental health, but that giving was an even stronger predictor than receiving. A similar finding was reported by Schwartz and colleagues (2003) among over 2000 members of the Presbyterian Church. A number of studies have found the same in children who help others in a meaningful way and/or assume responsibility for someone else, or even a pet (Zimrin 1986). This association between altruism, social interest and better health and well-being may be related to a shift in attention and focus from self to others, enhanced self-esteem, and greater perceived meaning and purpose in life.

Neuroethics is a relatively new field that focuses on "the evolutionary origins of moral sentiments…As a species of social primates, we have evolved a deep sense of right and wrong to reward reciprocity and cooperation and to attenuate selfishness and free riding (Shermer 2011)." For example, among nonhuman primates and humans "reciprocal altruism" appears to have benefits for survival including enhanced power and reputation, greater access to community resources during times of deprivation and even increased opportunities for mating. Researchers are currently investigating potential genetic and brain processes involved in moral thinking and reasoning, social cooperation, and altruism.

Altruism and Logotherapy

Altruism is at the very heart of logotherapy. In *The Doctor and the Soul*, Frankl wrote, "…human existence always points, and is directed, toward something other than oneself; or rather, toward something or someone other than oneself, namely toward meanings to fulfill, or toward other human beings to encounter lovingly. And only to the extent to which a human being lives our his self-transcendence is he really becoming human and actualizing himself (Frankl 1986, 294)." In the language of logotherapy, altruism represents a dereflection away from the self and a reaching out, instead, toward worthy goals, other people and/or meanings to be fulfilled (Graber 2004, 117).

Religion/Spirituality

Religion/Spirituality and Resilience

In *Honor Bound* (Rochester and Kiley 1998), a well-known account of American prisoners in Vietnam, the authors wrote "there is virtually no personal account in the Vietnam POW literature that does not contain some reference to a transforming spiritual episode." For example, the authors quote US Senator John McCain who commented, "To guard against despair in our most dire moments, POWs would make supreme efforts to grasp our faith tightly, to profess it alone in the dark, and to hasten its arrival. Once I was thrown into a cell after a long and difficult interrogation. I discovered scratched into one of the cells walls the creed, "I believe in God the Father Almighty""

A large body of scientific research has found that engaging in positive religious practices is associated with resilience as well emotional and physical well-being, including lower levels of depression, lower blood pressure and possible better immune function (McCullough et al. 2000). The positive health effects of religious practice appear to be related, in part, to attending religious services where parishioners often receive and give support to one another, are encouraged to live a healthy life style, and have access to resilient role models who are accustomed to responding

to tragedy, loss of life, and existential questions about meaning of life. Further, Fallot and Heckman (2006) reported that the use of religious coping strategies at the time of a traumatic experience among women with mental health and substance problems was associated with lower post-trauma distress.

Religion/Spirituality and Logotherapy

Frankl viewed logotherapy as a philosophy of life and as a therapy, but not as a religion. He believed that "Fusion of psychotherapy and religion necessarily results in confusion, for such fusion confounds two different dimensions, the dimension of anthropology and theology" (Graber 2004, 45). It is important to keep in mind that the word "spiritual," within the frame of reference of logotherapy, does not mean "religious" but instead it refers to the specifically human dimension of human beings. However, Frankl also understood the power and potential resilience-enhancing effects of religious beliefs: "After all, religion provides man with a spiritual anchor, with a security he can find nowhere else…It is my contention that faith in the ultimate meaning is preceded by trust in the ultimate being, trust in God" (Frankl 1988, 145). While distinct from religion, logotherapy nevertheless is compatible with most religious faiths. Logotherapy is a holistic approach to healing that addresses the mind, the body and the spirit; it finds value in learning from and standing up to unavoidable suffering; and it views religious values as potential sources of strength in the search for meaning and self-transcendence.

For Frankl, religion can serve as a source of strength and resilience when it assists the individual to reach his noetic or spiritual core, which "contains such qualities as our will to meaning, our goal orientation, ideas and ideals, creativity, imagination, faith, love that goes beyond the physical, a conscience beyond the superego, self-transcendence, commitments, responsibility, a sense of humor, and the freedom of choice making" (Fabry 1975, 16).

Flexibility: Acceptance and Cognitive Reappraisal

Flexibility in how one thinks about and behaves in stressful and challenging situations has an enormous impact on resilience. Possessing a repertoire of effective coping mechanisms and being able to shift from one mechanism to the next depending on the requirements of the specific situation gives the individual a strong foundation for responding to a broad array of challenges. A growing body of research has found that resilient individuals tend to use a number of different cognitive and emotional strategies for dealing with stress including accepting that which they cannot change, using emotions such as anger and grief to ignite courage and a sense of meaning, and reframing thoughts and beliefs about adversity through the use of humor and by searching for and finding opportunity in the midst of adversity. (Southwick and Charney 2012b).

Acceptance and Resilience

The ability to accept those things which cannot be controlled, those things beyond free will, has been cited as a source of strength and resilience by both philosophers and psychologists. For example, the stoic philosophers (Sherman 2005) believed in the importance of separating out and focusing on those things within one's power compared to those beyond one's power. While man is not responsible for that which is beyond his power, he is responsible for what is within the grasp of his free will. Acceptance has been associated with better mental health in a variety of different traumatized populations including survivors of extreme environmental hardship (Siebert 1996), and mothers of children undergoing bone transplants for life threatening cancer in their children (Manne et al. 2002). Acceptance has also been incorporated into a number of behavioral health therapies such as mindfulness meditation and Acceptance and Commitment therapy (Orsillo et al. 2005). These two approaches help the practitioner cope with stress by increasing psychological flexibility and accepting the present moment without judging it. Alcoholics Anonymous also emphasize acceptance as evidenced by the well-known Serenity Prayer: "God, grant me the serenity to accept the things I cannot change, the courage to change the things I can, and the wisdom to know the difference."

Acceptance and Logotherapy

Frankl believed in freedom of the human "will." However, he understood that humans are highly influenced and determined by a host of biological, social, historical and psychological forces. Yet, as noted by Joseph Fabry (1975), Frankl did not view man as "pandetermined." Rather, he believed that man always has the capacity to choose his attitude or response toward his fate. As Frankl put it, "Man's freedom is no freedom from conditions but rather freedom to take a stand on whatever conditions might confront him…[and this] capacity to take such a stand is what makes us human beings (Frankl 1988, 16)."

When a negative or tragic situation cannot be changed, Frankl recommended accepting it first, but then transmuting its meaning through the attitude that one adopts toward that fate. He wrote, "Logotherapy teaches that pain must be avoided as long as it is possible to avoid it. But as soon as a painful fate cannot be changed it not only must be accepted but may be transmuted into something meaningful, into an achievement" (Frankl 1988, 72).

Cognitive Reappraisal and Resilience

Cognitive reappraisal involves a reinterpretation of meaning. When cognitive reappraisal is positive, the individual reframes and finds positive meaning in events or situations that were previously viewed as neutral or negative. This capacity to positively reframe, to find opportunity in the midst of adversity, and to extract positive

meaning from trauma, and even tragedy, has been associated with resilience. In the 1970s, Norman Finkel (1974) noted that some people use a type of cognitive restructuring to convert stress and trauma into an experience of personal growth. Subsequently, Tedeschi et al. (1998) and others studied what is now called posttraumatic growth. To measure PTG, these researchers developed the Posttraumatic Growth Inventory with five scales: New Possibilities, Relating to Others, Personal Strength, Spiritual Change, and Appreciation of Life. PTG has been described in a number of traumatized populations including war veterans, former prisoners of war, college students, refugees, survivors of assault, and individuals with injuries and a variety of medical diagnoses.

One of the ways that cognitive reappraisal may foster resilience is through its effect on negative emotions. Reappraising the meaning of an event to be more positive alters the emotional and neurobiological reaction to that event. As noted earlier, positive emotions and optimism are related to resilience through multiple psychological and neurobiological mechanisms. For example, recent brain imaging studies have shown that positive cognitive reappraisal of negative situations increases activation in regions of the brain responsible inhibiting areas of the brain that process and respond to emotions such as fear (Ochsner et al. 2012) Thus, in a variety of studies resilience has been associated with the capacity to regulate emotions, particularly the capacity to reframe the meaning of potentially negative or adverse events and situations.

Cognitive Reappraisal and Logotherapy

Positive cognitive reappraisal is a common coping strategy used in logotherapy. For example, logotherapy views stress and tension as necessary for growth and for the fulfillment of meaning, rather than something to consistently avoid. Logotherapy also views past mistakes and failures as opportunities to learn and to self-correct. Frankl had the following to say about mistakes, "We are not to see the future as exclusively determined by the past…The mistakes of the past should serve as fruitful material for shaping a better future…the mistakes should have taught a lesson" (Frankl 1986, 77). Humor, as described in more detail below, is another way to reframe threat, stress, and even tragedy. It does this by creating distance from a difficult situation and gaining a sense of control over it.

Perhaps the most powerful example of cognitive reframing in logotherapy involves its stance toward "inescapable suffering." In logotherapy, inescapable suffering can take on greater meaning than that of painful burden alone. Through a process of cognitive reframing, it is possible for 'inescapable suffering' to become an opportunity for growth. As noted by Ann Graber in *The Journey Home*, "The transformative process—inherent in unavoidable suffering—makes us realize tragedy often contains the seed of grace. We can become more than we were before by facing the challenges life presents to us." And "We can emerge from our trials transformed into stronger and more compassionate human beings" (Graber 2009, 18, 32). In fact, as noted earlier, Frankl believed that one's appraisal of and

attitude toward inescapable suffering could provide the deepest and most noble meaning in life.

Humor

Humor and Resilience

Another form of cognitive reappraisal that has been associated with resilience is humor. Like positive emotions, humor is associated with a broadening of attention as well as greater creativity and flexibility of thinking. Studies conducted in multiple populations, including combat veterans as well as cancer and surgical patients, have found that humor is associated with reduced perception of threat, enhanced capacity to tolerate stress, and resilience. (Southwick and Charney 2012b). Using humor, it is often possible to face what is feared by reframing the feared situation into a scenario that is tolerable and over which one has more control. In fact, in some cases, humor creates enough distance from a feared or stressful situation to create a feeling that one has control over the situation by actually making fun of it. Interestingly, brain imaging studies have found that humor is associated with neuronal activation in brain regions known to be involved in cognitive reappraisal, reward, and motivation, each of which have been associated with resilience.

Humor and Logotherapy

Frankl believed that humans are uniquely capable of detaching themselves from painful situations through heroism and through humor. With both heroism and humor, the individual can take a stand toward his fate. As noted by Frankl, "Humor is another of the soul's weapons in the fight for self-preservation. It is well known that humor more than anything else in the human makeup, can afford an aloofness and an ability to rise above any situation, even if only for a few seconds (Frankl 2006, 63)." Thus, humor creates perspective and allows man "to put distance between himself and whatever may confront him. By the same token humor allows man to detach himself from himself and thereby to attain the fullest possible control over himself" (Frankl 1988, 108).

This capacity to detach from the self is at the heart of paradoxical intention, one of the distinct therapeutic techniques in logotherapy, and is often used to help the individual understand that he is not the same as his symptoms. With paradoxical intention, thoughts and sentences are typically formulated in a manner that humorously exaggerates the fear or unwanted behavior. Ann Graber noted that "The moment we laugh at ourselves, some sense of the fear disappears," and Frankl recommended that "paradoxical intention should always be formulated in as humorous a manner as possible" (Graber 2004, 108).

Active Coping

Active Coping and Resilience

A large body of research has found that active problem-focused coping strategies are generally more effective than passive emotion-based coping strategies when dealing with stress, trauma, and adversity (Southwick and Charney 2012b). Typical active coping strategies include gathering information, acquiring skills, problem solving, confronting when necessary, making decisions, seeking social support, and cognitively reappraising negative situations. On the other hand, common passive coping strategies include denying that a problem exists, diverting or distraction attention, avoiding or withdrawing, using substances of abuse, repetitive negative venting, and blaming someone or something else. A positive association between active coping strategies and resilience has been reported in numerous animal studies and in college students, at-risk children, patients with medical illnesses such as cardiac illness, and depressed and traumatized adults among other populations. It is important to note that active problem-focused coping is not always the most effective strategy for dealing with stress and trauma. There are times when pulling back, reflecting, accepting and mindfully observing are most effective.

Active Coping and Logotherapy

Logotherapy advocates an active approach to dealing with challenges in life. While intention and values are of central importance in logotherapy, man's intentions, values, and responsibilities are generally to be realized in the form of concrete tasks. As Frankl noted, "Perhaps the law by which man's responsibilities are revealed only in concrete tasks is more general than we imagine. Objective values become concrete duties, are cast in the form of the demands of each day and in personal tasks. The values lying at the back of these tasks can apparently be reached for only through the tasks" (Frankl 1986, 42). For Frankl, this task quality of life was essential for well-being. One's occupation or station in life did not matter. What mattered was how the individual works, "whether he in fact fills the space in which he happens to have landed. The radius of his activity is not important; important alone is whether he fills the circle of his tasks (Frankl 1986, 43)." Frankl further notes that "nothing is more likely to help a person overcome or endure objective difficulties or subjective troubles than the consciousness of having a task in life (Frankl 1986, 54)."

Classifying coping strategies as active or passive is not always straightforward, and active strategies are not always adaptive while passive strategies are not always maladaptive. For example, Frankl described "wrong passivity" as a behavioral pattern where the individual "flees from fear," and withdraws or avoids situations that he believes will cause anxiety. On the other hand, when the individual ridicules or makes fun of his anxiety through paradoxical intent, this represented an example of

what Frankl called "right passivity." Further, Frankl (1986) believed that fighting against obsessions and compulsions constituted "wrong activity" while focusing attention away from the self and away from one's neurosis were examples of "right activity."

Overall, logotherapy takes an active approach to life, where meaning is found, rather than given, and discovered in the individual's day-to-day tasks and responsibilities. As Frankl made clear, "I have said that man should not ask what he may expect of life, but should rather understand that life expects something from him… Life is putting its problems to him, and it is up to him to respond to these questions by being responsible" (Frankl 2006, p. 113). To conclude: Life is the questioner; how we respond to life's challenges is our answer to life.

Stress and Training

Stress, Training, and Resilience

Modern Western society typically views stress as something that is bad for our health and well-being. However, not all stress is harmful: While stress that is over-whelming and beyond our ability to manage tends to be harmful both psychologically and biologically, stress that is manageable can be growth-promoting. On the other hand, too little stress can result in atrophy and weakening. For the purposes of growth, stress inoculation is a useful technique. Stress inoculation involves exposure and adaptation to a gradual but progressive increase in level of stress. For example, when using a stress inoculation approach to training for a marathon, the trainee gradually increases the length and intensity of training sessions until he/she has developed the cardiovascular, muscular and psychological strength and endurance to complete the 26-mile run. As noted in *The US Army Combat Stress Control Handbook*, "To achieve greater tolerance or acclimatization to a physical stressor, a progressively greater exposure is required. The exposure should be sufficient to produce more than the routine stress reflexes. Well-known examples of acclimatization are heat acclimatization, cardiovascular (aerobic) fitness, and muscle strength…you can become aerobically fit only by exerting yourself to progressively greater degrees of physical effort…In other words you must stress the system" (Department of the Army 2003, p. 29). Jim Loehr of the Human Performance Institute describes the process in the following way: "Growth and change won't occur unless you push past your comfort zone, but pushing too hard increases the likelihood that you will give up" (Loehr and Schwartz 2003, 179). A stress inoculation approach to training can be applied to a host of other learning goals such as learning to focus or meditate.

Learning to adapt to and harness stress and tension is an essential component of resilience. Many stress management programs are designed to reduce stress by removing or reducing stressors (e.g., shortening the length of military deployments to combat zones) and by reducing emotional responses to stressors (e.g., meditation,

breathing techniques). However, resilience training also focuses on learning to manage and grow from stress. This can be achieved by mindfully focusing on and learning from the routine and unexpected stressors of life and/or by actively seeking out stressful challenges (e.g., running a marathon) with the intention of mastering these challenges.

Stress, Training, and Logotherapy

Like resilience training, logotherapy does not specifically attempt to reduce stress. In fact, Frankl recognized that a certain degree of stress and tension motivates people and that constantly seeking to return to a baseline of minimal stress, as per homeostatic theory, is not the path to living a meaningful life. According to homeostasis theory, man is constantly trying to reduce tension in order to "maintain or restore an inner equilibrium" and "in the final analysis, this is the goal of gratification of drives and the satisfaction of needs." (Frankl 1988, 31). Frankl further writes, "Contrary to homeostasis theory, tension is not something to avoid unconditionally, and peace of mind, or peace of soul, is not anything to avow unconditionally. A sound amount of tension, such as the tension, which is aroused by a meaning to fulfill, is inherent in being human and is indispensable for mental well-being. What man needs first of all is that tension which is created by direction" (Frankl 1988, 48).

Responsibility

Responsibility is at the core of resilience; responsibility to face one's fears, to determine what is and what is not within the grasp of one's free will and power; to foster positive emotions and realistic optimism, to articulate and adhere to a core set of moral and ethical values; to seek support from and to give support to others; to actively solve rather than avoid problems; to cognitively reframe negative, stressful and traumatic experiences in a more positive light and to search for opportunity in adversity; to develop the skills necessary to accomplish one's goals; to embrace challenges; to learn from failure; to accept that meaningful achievement typically requires hard work and perseverance; and to learn how to manage and grow from stress.

Responsibility is also at the very core of logotherapy, which Franklsaw as an education about responsibility. What are some of the responsibilities that logotherapy highlights? The responsibility to use one's free will or freedom to "choose if meaning will be found in the moment to moment circumstances of life"; "to use the passing opportunities to actualize potentialities, to realize values, whether creative, experiential, or attitudinal"; to decide "what to do, whom to love and how to suffer" (Frankl 1988, 74); to "carry out the duties that various roles in life impose upon us, to responsible-ness, that inner mandate of what I ought to do beyond the more obvious what I should do"; to "push toward the concrete meaning of one's own existence;

to seek out what is most meaningful along with the commitment to carry it out;" (Graber 2004, 82); to find the strength, commitment, and resilience that is needed, moment to moment, to live a life of meaning and purpose; to fill "the place in which he [man] happens to have landed" and to "fill out the circle of his tasks" (Frankl 1986, 43).

To embrace the responsibility that constitutes the core of resilience and logotherapy requires courage. Frankl described this beautifully when he wrote, "Responsibility is something we face and something we try to escape…There is something fearful about man's responsibility…It is fearful to know at this moment we bear the responsibility for the next, and that every decision from the smallest to the largest is a decision for all eternity—that at every moment we bring to reality—or miss—a possibility that exists only for the particular moment…But it is glorious to know that the future, our own and therewith the future of people and things around us, is dependent—even if only to a tiny extent—upon our decision at any given moment" (Frankl 1986, 35).

Conclusion

In this chapter we have focused on a handful of well-researched psychosocial and spiritual factors that have been associated with resilience, and discussed how logotherapy might enhance these factors. Our discussion is limited in scope since resilience is a complex construct that can be influenced by a host of biological, psychological, social, and spiritual factors, and since logotherapy likely can affect a substantial number of these factors. Nevertheless, the evidence we have presented suggests that logotherapy, in addition to assisting individuals with a wide range of medical, behavioral health, and social problems can strengthen resilience and facilitate personal growth in the face of adversity and trauma.

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