THROWNESS, FREEDOM AND THE WILL FOR AUTHENTICITY:
AN EXISTENTIAL/DEVELOPMENTAL APPROACH TO PSYCHOTHERAPY

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Abstract:

This paper is based on a presentation delivered during the First World Congress of Existential Psychotherapy held in London in May 2015. It explores the issue of throwness and freedom in relationship to authenticity. Our ability to claim ownership of our givens, our throwness, is an act of free will which allows us to ‘be who we are’ and to ‘love our destiny’. In order to understand our psychological givens different developmental theories are integrated in what is termed, the “DNA of the Soul”. Finally, it is proposed that certain developmental milestones have similar counterparts in the psychotherapeutic process.

Key words:

Throwness, Free will, Authenticity, Development, DNA of the Soul, Process of development.

Introduction:

One of the paradoxes that have tormented me for years is that of our freedom given the number of predicaments which we have been “thrown into”. How can I claim that I am free when so much has been decided for me despite my will? Biological, environmental, cultural, political, and numerous other variables are beyond my control. What actually lies within my control and how much say do I have in my life? As a teenager and young adult I strove to be ‘authentic’, to be myself. But is there such a thing as a self and can it be truly mine? For years I have tried to decipher what comes from my own ‘inner voice’ and what from those around me. When am I falling into the ‘they-self’ and when am I true to myself? Can I tease out those important influences that I have hated to believe determine my life? If I am determined how can I claim there is a free will?
In my effort to understand who I am, I endeavored not only to explore my inner self but also to integrate and synthesize different developmental theories so as to figure out how I became who I am. It was not only my biological DNA that determined who I was but also my early experiences, my relationships with my family and with important others. Would I be the same person if I had had a different mother? I am sure I wouldn’t. This holds true for my father, my brother, my teachers and so many other important individuals that I met on my way. Moreover, it seems to me that this is also true for all individuals who seek psychotherapy. At least part of their problem is the experiences they carry engraved (very much like the biological DNA) in their ‘skin’ from their meeting with ‘important others’.

**Throwness and the “DNA of the Soul”:**

As Ernesto Spinelli (2007) so aptly describes:

...“Existential phenomenology, contrary to popular assumptions, insists that human beings are not always free to choose. There exist conditions of being where no choice presents itself. Primary among these is our throwness. None of us had the choice in coming into existence. Rather, each of us was ‘thrown into’ being. Similarly, none of us will have any choice in the fact that we will be, at some certain, if indeterminate, point in time, ‘thrown out’ of existence, in that we will cease to be as a human being. Furthermore, we are also ‘thrown’ into a particular body, a particular time, culture, set of prevailing attitudes, mores, stances & opinions. These too are beyond choice as are the infinity of stimuli or events ‘thrown up’ by the world to which we must respond. Thus, such choices as may exist are always situated in a set of ‘thrown’ conditions, whose presence can neither be chosen nor truly controlled.” (p.45)

If this is how life is and we are faced with so many predicaments which we do not choose and we cannot control, what are we striving to accomplish in psychotherapy? Is it possible that what we are striving for is awareness and ownership? The first step in this process is to recognize, understand and come to terms with the many givens we are faced with. It is difficult yet important to slowly make peace with and accept our situation as is; to ultimately reach the stage where, as Nietzsche (1954) suggests, we ‘become who we are’ and ‘love our destiny’.

Our givens are both ontological/ existential and thus similar for all but also ontic, that is unique and particular for each one of us. The *ontological givens* of freedom, responsibility, aloneness, meaningfulness, finitude, being-in-the-world, embodiment, etc. have been discussed by various thinkers both psychotherapists (May 1977, 1983, Yalom 1980, Cohn, 2002, etc.) and philosophers (Sartre, 1956, 1962, Heidegger, 1962, Merleau Ponty, 2010, etc). Our *ontic*, or personal givens are comprised of our biological DNA, that is, who we are as physical beings (brain structure, neurochemistry, genetic predispositions, etc.), which are inborn, as well as all the other givens (society, culture, era, family, etc.) that are part of our upbringing and socialization which constitute our psychological givens, or as I have called them, the ‘DNA of the soul’.
The DNA of the soul (see Table 1) is an integration of different developmental theories that I have been working on since I was in graduate school and which was first presented in 2002 at the World Congress for Psychotherapy in Vienna. Since then I have written and expanded on the idea of our psychological DNA (2003, 2007, 2009, and 2012) in an effort to clarify how different theories can help us understand not only individual development, but the process of psychotherapy as well. The personal milestones described by so many different theorists (Erikson, 1963, 1980, Freud, 1959, 1965, Vaillant, 1977, Levinson, 1979, Bowlby, 1969, Mahler, 1975, May, 1983, etc.) are in many ways similar to the ‘developmental milestones of therapy’. We often refer to the importance of the ‘healing relationship’ between therapist and therapee but we forget to acknowledge the stages through which this important relationship develops.

The term “DNA of the Soul” has been used as an allegory representing our psychological development for a number of reasons. First, it implies the ingrained nature of certain characteristics that are the result of our upbringing. Then, it symbolizes development as a spiral movement with two poles. In my understanding development is not a linear process but rather a circular one. We often revisit older states of being, repeating past mistakes, or re-creating past ways of relating, in order to re-work on unresolved issues. Habit is definitely an enemy to change, but it can be countered by our wish to understand and to make new meaning of past experiences so as to proceed further along the path of our development with the hope of reaching old age with a sense of fulfillment and integrity for the life we have spent.

Furthermore, development proceeds, very much like all of life, between two poles where there are ‘positive’/favorable and ‘negative’/unfavorable outcomes. That is, growth-enhancing and growth-inhibiting experiences, moments of light and of darkness. It is the ultimate integration of light and dark, yin and yang, which brings a feeling of wholeness and a sense of peace that we so much desire. In order to reach this state of inner harmony we need to work on understanding and accepting both elements of (our) nature. It is both sides, but primarily our dark inhibiting forces that we work with in psychotherapy. As Franz Alexander (1980) claimed, we as therapists are trying to provide those ‘corrective emotional experiences’ that will allow the individual to unblock their growth-enhancing forces so as to be able to live in the best possible way, in terms of their own definition of what “best” is for them.

**Development through the life span & similarities with the therapeutic process:**

To understand the process of development from birth to death different theories (Maslow, 1970, Rogers, 1965, Miller, 1983, Jung, 1966, Erikson, 1963, 1980, Freud, 1973, Winnicott, 1971, Bowlby 1973, Mahler, 1975) have been combined and are viewed as playing differing roles depending on the era and the psychological needs prominent at the time. This integration has led not only to the creation of our developmental helix but also to an expanded version of Maslow’s hierarchy of needs.
Thus, a combination of primary relationship theories, cognitive, psychoanalytic and behavioral theories are more relevant to early developmental stages when one has to deal with physiological and basic psychological needs. In order for these basic needs to be met feeding and the presence of a caring and consistent mother are very important. The quality of our early relationships will definitely influence the way we view the world and relate to others and to life (for example, the establishment of trust will lead to the ‘virtue of hope’, Erikson 1963). However, as we proceed to higher developmental stages other theories seem to become more important for understanding core issues, such as identity formation, the ability to form intimate relationship, make commitments, be responsible for our life and the life of others around us, for dealing with issues of meaning and creativity and reaching towards the end of life with a sense of fulfillment and satisfaction.

Let us look then at some of the most important developmental milestones and their relationship with different theories, with individual development and with the process of psychotherapy. In infancy the establishment of trust (Erikson, 1963, 1980) is a basic developmental milestone, which is similarly a cornerstone of the therapeutic work. Its establishment is not a given, but something that has to be gradually built within the relationship, very much like in our initial relationship with primary care taker. Issues of safety and security are the first psychological needs (Maslow, 1970) that have to be met in order for the infant to successfully proceed to higher developmental needs such as acceptance, belonging, and self-esteem which arise as the child moves into toddlerhood, childhood and adolescence. Of course, the primary biological needs have primacy for physical survival but it is known that the presence of a nurturing mother (a ‘good-enough’ mother, Winnicott, 1971) is critical for psychological survival. In this first period of extreme dependence the satisfaction of ‘hunger’ needs is important not only through the breast and the oral stage of Freud (1973, 1976) but also through the loving presence of a caring, consistent and available mother who will make the baby feel safe and wanted.

Our emotional life is to a large extent dependent on the bond (Bowlby, 1969, 1973) that is created between caregiver and infant. In addition to the influence of this early relationship on the quality of our relating with others, recent research indicates that “…early bonding and attachment experiences not only build the networks of the social brain, they also promote the building of the brain as a whole through the energy and excitement generated within the attachment bond” (Cozolino, 2002, p. 191). The responsibility for this early relationship is primarily based on the caregiver. This bond has often suffered severe blows and attachment issues have to be dealt with first before the individual can proceed to more satisfying ways of relating to others. No doubt the infant’s innate temperament plays an active part in this bond and difficulties in relating to ‘mother’ (for example, autism, or other idiosyncrasies) can influence the quality of the relationship. However, we cannot claim that what is happening in an
infant’s and toddler’s life is his/ her responsibility, although we may adhere to the idea that from the beginning of life we each make sense of the world and our experiences in our own unique way. It is still difficult to imagine responsibility in the same existential sense that we employ when we are dealing with adult, or even adolescent, life.

As we enter into the second year of life and the second developmental stage we are faced with new challenges and acquire new abilities. Our ability to walk and talk signify our growing ability for independence and autonomy. Mother needs to be able to loosen the symbiotic bond (Mahler, 1975) and to allow the infant to slowly become the separate and unique being he or she is. The narcissistic omnipotent little creature has to be respected, valued and mirrored sufficiently so as to start developing a sense of self as competent and worthy. The development of autonomy instead of feelings of shame and doubt (and I would add fear as well) is an important developmental milestone. Most clients struggle with issues of self-esteem haunted by feelings of worthlessness and shame for who they are. It is known that toxic shame affects the way we view our self and others and causes ‘dysregulation of the autonomic functioning’ (Cozolino, 2002). In general “…Recent research suggests that attachment patterns formed in childhood may be relatively stable into adulthood…. Secure attachments represent the optimal balance of sympathetic and parasympathetic arousal, whereas their imbalance correlates with insecure attachment patterns”. (Cozolino, 2002, p. 208-9),

It is also at this stage of greater autonomy that free will is expressed by the so called ‘terrible twos’. The toddler begins to show the first signs of an independent will differing from others and wanting to ‘enforce’ this difference of opinion very much in line with what Fromm (1977) discusses as ‘freedom from’. It will be many years later that we can move from this oppositional form of freedom to a ‘freedom towards’ which will signify less of a reactive freedom and more of a true positioning of the individual in the world. It is, however, at this primal stage that we begin to express and explore our free will. The training of our will power and our ability to ‘stand on our own two feet’ is often hindered by very demanding, authoritarian, abusive, neglectful and overprotective parents. It is often the acceptance, nurturance and caring of a ‘good enough therapist’ that will substitute for the lack of encouragement and support of the client. It is the therapist that must be careful to foster the autonomy and independence of the therapee while remaining on his/her side as a ‘co-traveler’ in this difficult struggle to “become who s/he is”.

The development of our self-esteem is largely based on our feelings of competency developed throughout childhood. Social and educational skills acquire primacy and the child is faced with greater challenges outside the home environment. Feelings of incompetence and guilt can hinder the child’s mastery of skills and feelings of integration and communion with others that are so important for later life. It is
important for parents to find a balance between demands and prohibitions on the one hand and the encouragement of initiative and freedom on the other. The presence of loving and caring parents is a blessing since, as Fromm mentions in his book “The Art of Loving” (1963), it is important for us to have once been loved in order to know what love is. Often it will be in therapy that the client will receive the love and acceptance missing in order to value and love him/herself. As Louis Cozolino (2002) writes in his very interesting book “The Neuroscience of Psychotherapy”:

“... the powerful shaping experiences of childhood can be modified through subsequent personal relationships, psychotherapy and self-awareness... A healing environment, such as good-enough psychotherapy, in which trauma is processed and resolved, supports this re-integrative process”. (p.210)

I see this process of integration (see Table 3) as one that continues throughout life and hopefully leads us to a more holistic way of functioning. We integrate and synthesize not only opposing forces of light and darkness but also of higher thinking processes/upper brain (cortex) with lower/primitive brain (amygdala, limbic system, etc.), as well as the functions of the left and right hemispheres leading to a greater integration of the four psychological functions, mentioned by Jung (1966), thinking, feeling, sensation and intuition. This biological, psychological and spiritual integration will enable us to experience and make sense of life in a more open and imaginative fashion and will help us to rewrite our life’s story in more creative and expansive ways.

Proceeding with the developmental helix we see that childhood and adolescent experiences are very important for the formation of an identity and a direction in life that will allow us an ever-growing sense of autonomy and individuation from our family. As we proceed into adolescence and early adulthood new psychological needs take primacy. Our needs for belonging, for recognition and self-esteem are important for the development of our growing ability to be in charge of our life, of being separate and unique. Humanistic, existential and transcendental theories gain greater significance in understanding the role individual choices play in adult development. As we enter into adulthood we are increasingly capable of claiming responsibility for our choices and for leading our life into the direction we choose as more personally fulfilling and gratifying. It is important to recognize that we are not only responsible for what we chose but also for what we do not choose. With every choice we make other possibilities are excluded.

Furthermore, it is important to recognize that not only we are free to choose where we stand and what we want of life but that we have the responsibility to make our choices come to fruition. We have to have the will power to put them into effect. This is a vital point for psychotherapy since it is the client who has to act in order to achieve his/her goals. It often seems that we hope for a ‘magical cure’ or that somehow things will change in our life without us having to work hard for it. Part of the psychotherapeutic
work has to do with our acceptance that life is not a ‘rose garden’ and that nothing that is of value to us comes without our conscious and continuous effort.

Successful outcome of the previous stages will help the young adult to form intimate relationships, to love and to work. Relationship issues are primal in psychotherapy. Very often individuals come to therapy because of difficulties with relationships. The ability to make and honor commitments is often viewed as a sacrifice of personal freedom. However, it is important to recognize that serious involvement with what we choose as our path is required for successful outcome. Whether we decide to commit to a vocation or to a relationship we are relegating part of our freedom to the task at hand. This is why it is so important that we are fully aware of the decisions that we are making at certain pivotal moments in our life. Unfortunately very often the decisions are based more on the ‘they-self’, on what others do or what we believe it is expected of us to do, rather than on our own wish. If what we choose is what we wish we must be able to face up to the difficulties and the challenges of the choice. We will not see ‘sacrifices’ as terrible compromises but instead we will view them as necessary steps for success.

As we enter middle adulthood our ability to care for and give to others, to create and be satisfied with ourselves and with life becomes our new developmental task. The issue of meaning becomes prominent since we are aware that, more or less, half of our life is already gone. What have we worked for and do we feel that our commitments were worthwhile? The middle aged individual is challenged by bodily changes that signify a new maturity. As Jung (1966) suggests the spiritual life of the individual begins after forty where one has to move from physicality to spirituality. The great emphasis of the modern world on eternal youth and the fear of any signs of aging often hinder this important transition. It is important to gradually be able to reconcile with the past and to acknowledge that there is only so much that one can do in a single life time. To be able to feel that life was well lived and, to the degree possible, lived to the fullest. All these accomplishments will help the person to reach old age with the optimal balance of integrity vs. despair that Erikson (1980) described so well, the sense of self-actualization that Maslow (1970) discussed and a sense of wholeness and individuation as proposed by Jung (1966).

Our development from birth to death can be seen as a process of individuation which is the result of a series of separations, of ‘little deaths’ and betrayals. If we are to attain selfhood and individuation it is unavoidable that we will experience losses, that we will betray and we will be betrayed. In order to honor our existence we have to be able to leave the safety of belonging and venture into the uniqueness and separateness of our being. We have to be able to accept losses and deal with our fear of standing on our own and of being different. We have to withstand the torment of existential aloneness which brings us face to face with our responsibility and our finiteness. Reaching old age
with a sense of **integrity and wisdom** is a consolation for the hardships we have to endure during life but in old age as well. Growing old is not an easy task and our fear of death is often given primacy over our fear of old age and of weakness. However, for most individuals it seems that the way we are going to die is as frightening as death per se. No western theory is really looking so much into the question of how we can die well. One has to look more into Eastern philosophies to find guidance as to these later stages of life and our ability to live well and die well. Thus, we can say that no one theory is irrelevant to our understanding of human nature and evolution. The more theories one combines the greater the picture that s/he can see.

**Process of development and existential therapy:**

Existential theory is valuable and unique in that it provides us with an open ground for integrating all these different theories in order for us to better grasp the concept of ‘Being’. What does it mean ‘to be’, to exist, in the midst of all this turmoil that we call life? We are constantly faced with the uncertainty and fluidity of life and our feelings of ‘groundlessness’ are especially prominent during crises. When we are born we find ourselves in a completely unknown territory and our connection with ‘mother’ is our only anchor in these first steps into the unknown. It is no wonder that a secure attachment is so basic for creating feelings of safety. Recent attachment theories believe that this is true not only in early life but throughout life and this is what makes intimate relationships so important yet so difficult. Our ground moves under our feet when we lose loved ones. We have to re-integrate our life, find new meaning and new ground on which to stand. This process of development (see Table 4) can be seen throughout life. It is, however, our last separation from life that causes us most distress since it leads us to the greatest unknown. Belief in a higher power often helps with this transition into this new groundlessness. It helps us with our fear of nothingness and gives some sort of meaning to an otherwise meaningless struggle.

Existential psychotherapy offers us a ‘grounding in reality’ which is a difficult yet important step for our evolution. We need to acknowledge that disappointment, failure, finiteness are part of our life and our being in this world. Existential theory can help us understand our ontological givens. We are all going to die, yet we are also free to make the best that we can of our life; we are alone and yet inexorably connected with others; we seek for meaning in a meaningless world and we will never know what is best for us unless we try. However, with every choice we make others are left behind and we can never know how our life would have been if we had chosen differently. Although we are full of possibilities there is only so much that we can fulfill in a life time and thus we cannot avoid the existential agony and guilt that this brings to life. Finally, it is impossible to face life without learning how to lose and some of the most important losses have to do with our ‘important others’. Existential theory does not work with the past and is primarily focused in the here-and-now because now is what
we have. However, it is important for the therapist and the client to understand both where we come from and where we are heading. Our background definitely illuminates many aspects of the ways we relate in the here-and-now and helps us understand where we want to go. But change has to happen in the now and we have to take action in order for it to happen.

**Freedom, Responsibility and the Courage to ‘Be who you are’:**

Although we are not free of conditions and givens we are free to take a stance, to respond (respons-ability) to life in the best possible way we can under the specific circumstances. When we look back we often feel that we could have done better but I believe that we usually do the best we can at the time and it is important to learn how to accept and forgive our limitations. Looking from the outside everything seems easier than when we are in the middle of turmoil. Criticism and rejection come easily when we are not the ones faced with the mess of life (and life can become messy). It is also easier to be forgiving when we are not the ones who have been wronged. It is important that, as the alcoholic anonymous prayer says, we are able to *accept the things we cannot change, have the courage to change the things we can, and the wisdom to know the difference.*

Understanding, acknowledging and accepting our inheritance is part of the psychotherapeutic process. We need to understand and make sense of our experiences, we need to integrate the good and the bad elements of the baggage that we are carrying. Even more so, we need to be able to stop carrying them as baggage, accepting them as integral parts of who we are in the here-and-now. In this way we are claiming responsibility for our life and we are becoming the authors of our life.

…. “The existential meaning of authenticity is in the first four letters ‘auth’ as in authorship. It refers to how much a person is able to be open to existence, anticipate its truth, oversee its difficulties and take responsibility for the consequences of their choices. Authenticity cannot be standardized or normalized. 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.**”

Emmy Van Deurzen & Martin Adams (2011), p.92

Authenticity and authorship can be viewed not only in relationship to current and/or future choices and actions but can be seen as part of this act of free will which allows us to view our inheritance as who we are and to claim, as Nietzsche did, “I am who I am” whether I chose my predicament or not. It is an even greater act of will to decide that not only I accept who I am and the conditions of my life but even more so I “love my destiny”. These two dictums of Friedrich Nietzsche comprise I believe the essence of our therapeutic work. Psychotherapy is a process of realization and ownership of who we are. These acts of will require the courage that Nietzsche expressed in his life and Tillich (1952) described in his “Courage to Be”. I often think that it is so difficult yet
so important to be able to say (and mean): “I have no qualms with the plot of land that was handed to me I just do the best I can to keep it fertile and growing”.

**Conclusion:**

It is beyond the scope of this paper to describe the DNA of the soul to its fullest. Instead, my intention has been to show its relevance to existential psychotherapy. All the conditions which we have been thrown into form our personal givens. It is what we have to accept as the framework within which we are living and acting. To be free means to take responsibility for our life, to respond to life and the predicaments in which we find ourselves. We are not free from conditions but we are free to accept them and do the best we can with them (Frankl, 1973, 1976). This is how I understand Nietzsche’s dictums “Be Who You Are” and “Amor Fati”. We are all these experiences and it is impossible to separate what is ours and what is theirs. We can, however, claim ownership of all of our experiences and make them our own. We can be who we are and love our destiny while making of it the best that we can.

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Table 1: The DNA of the Soul

<table>
<thead>
<tr>
<th>Stage</th>
<th>Main Themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth</td>
<td>First separation</td>
</tr>
<tr>
<td>Infancy</td>
<td>Sensorimotor stage</td>
</tr>
<tr>
<td>Toddlerhood</td>
<td>Sensorimotor stage</td>
</tr>
<tr>
<td>Latency</td>
<td>Industry</td>
</tr>
<tr>
<td>Adolescence</td>
<td>Identity, fidelity, genital, belongingness</td>
</tr>
<tr>
<td>Early adulthood</td>
<td>Intimacy, virtue of love, commitments</td>
</tr>
<tr>
<td>Middle age</td>
<td>Generativity, virtue of care, cognitive needs</td>
</tr>
<tr>
<td>Old age</td>
<td>Holiness, integrity, virtue of wisdom, self-actualization</td>
</tr>
</tbody>
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**Death**
- Despair
- Last separation
- Unhappy, bitter
- Unfulfilled

**Meaninglessness**
- Intrapyschic
- Interpersonal
- Existential

**Existentalism**
- Development of responsibility, role confusion
- Low individuation

**Inferiority**
- Low self-esteem

**Poor resolution of oedipus complex**
- Guilt

**Shame & Doubt**
- Fear
- Poor self-control
- Low individuation

**Mistrust**
- Pessimism
- Insecure attachment
Table 2: The expansion of Maslow’s hierarchy of needs
Table 3: The integrative process
Table 4: The process of development
References:


