Authenticity: A Goal For Therapy?

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The concept of authenticity as a 'moral ideal', (that is, a standard for what is a better or higher way of living) is relatively new.   Indeed, the contemporary notion of authenticity, commonly linked with ideas of self-realisation and self-fulfilment, only became possible with the writings of Rousseau, as prior to this, the notion that each of us has 'an original way of being human' (Taylor, 1997:23) had not really been considered. According to Taylor, Rousseau was the first to put forward the idea that moral salvation was to be found 'from recovering authentic moral contact with ourselves' (ibid.), and thus the aim of making contact with our 'inner' or 'true' selves gained a new significance.

In the field of psychotherapy and counselling the idea that it was important to achieve this 'authentic contact' became increasingly popular with the advent of the humanistic therapies, which flowered in North America and Britain in the 1960s. Indeed the humanistic models argued that clients' problems, or presenting symptoms, could be seen as revealing 'an underlying experience of incongruence at the level of the self-concept.' (Spinelli, 1994: 258) In other words, client's problems often stemmed from their not being their 'true selves'. From this perspective, enabling the client to be true to their 'real' self, or to live an authentic life, necessarily becomes a goal for therapy, as this is seen as the way to ensure that 'the client will change and grow in a constructive manner.' (Rogers, 1980:115) This connection between achieving authenticity or congruence and finding and being one's true self is disputed by those adopting an existential approach to therapy, for whom authenticity means something quite different.

For van Deurzen the key to becoming authentic lies in facing 'our own death and with it our own limitations' (Deurzen Smith, 1997:39), as it is, 'In the process of opening ourselves to this reality we find ourselves most truly.' (ibid.) It is this quite different interpretation of authenticity (based on the views of Heidegger,1927) which raises questions about the compatibility of promoting an authentic life and the aim of 'alleviating' a client's distress (UKCP guidelines). As Brazier puts it,

> We want that our clients become authentic and we want that our clients cease to suffer and these two aims may be incompatible. We are caught on the horns of a dilemma... Passion and comfort are infrequent companions. (Brazier, 1992: 92)

It is this potential incompatibility between becoming authentic and ceasing to suffer, or at least becoming less distressed, that I intend to explore in this paper.

I shall begin by considering the link between authenticity, congruence and the concept of the 'Self' within humanistic therapy.   Then, by examining Heidegger's concept of authenticity in *Being and Time*, as well the views of contemporary existential psychotherapists including van Deurzen (1988, 90, 97, 99), Cohn (1995), Spinelli (1994) and Strasser (1997), I shall explore more fully how the humanistic model's concept of authenticity differs from that used in an existential framework.

I then propose to examine whether it is in fact possible to achieve authenticity, what the implications and consequences of achieving it might be, and thus whether psychotherapists and counsellors wishing to alleviate distress should promote authenticity as a goal for their clients.

What is Authenticity?

Authenticity is defined in the dictionary (Collins, 1997) as a 'quality of genuineness', 'real' and 'not of doubtful origin'. It is this idea that forms the basis for what Carl Rogers, the father of Person-centred therapy, calls 'congruence'.   Rogers describes congruence as a close matching 'between what is being experienced at the gut level, what is present in awareness, and what is expressed to the client.' (Rogers, 1980: 116) Thus, Rogers promotes congruence not just as a goal for the client, but as a task for the therapist, stating that the more congruent the therapist is, i.e. the more they are themselves in the relationship, putting up no professional front or personal facade, the more beneficial it will be for the client (Rogers, 1980). This, however, raises the question of what it is to be oneself, and thus highlights one of the key differences between the humanistic and existential approaches.   As Spinelli explains, whilst

> ... the humanistic model assumes the existence of a core, unitary self which is the source point for individual development and actualisation, directed towards becoming 'the self which most truly is' (Rogers, 1961) (Spinelli, 1994: 260)

for the existentialist, there is no set or substantial self. The self is always becoming and should be understood as a process rather than a thing. Thus, though we may have a self-concept, this is seen to be merely a construct. As Sartre puts it, 'what the for-itself lacks is the self - or itself as an

in-itself.' (Sartre, 1958:89) Van Deurzen describes this idea eloquently when she states,

> My self is not a substantial entity. My I is like an eye, an iris, an opening which lets through the light of existence. Its function is to be transparent and to be open so that life (being) can shine through. (Deurzen-Smith, 1997: 178)

Van Deurzen is aware of the difficulties in accepting that we have no substantial reality and urges us to think 'of ourselves as a channel, a river, through which the water of life flows' (ibid.); in doing so we focus on how we are always changing and taking new directions, unless, that is, we have chosen stagnation. From an existential point of view, then, 'there can be no authentic (true) or inauthentic (false) self, but only an authentic way of Being-in-the-world.' (Cohn, 1997:125)

In his paper on authenticity and the aims of psychotherapy, Cohn (1997) takes up this point, questioning the commonly used concepts of the true and false self. He does so by examining the examples of Winnicott (1965) and R.D. Laing (1960), who despite differences share an assumption

> that there is a part of ourselves which submits to the demands of the world - the false self - while another withdraws from them, the 'true self'. This submission has a fundamental consequence; it separates us from what we 'truly are. (Cohn, 1997: 123)

Laing suggests that he is drawing from the work of existential writers on authenticity for his concept of false self, and indeed, in his connection between the false self and the idea of compliance, there is a similarity, as shall be seen, with Heidegger's idea of 'falling in with the they'. However, in seeing the self as an essence or substance, Laing makes a radical departure from the existential view, which as stated above, sees the self as process.

This important difference between the humanist and existential views of the self, a difference that has ramifications for their respective views on authenticity, is succinctly expressed by Gerald Corey, who states that

> Existentialists take the position that we are faced with the anxiety of choosing to create a never secure identity in a world that lacks intrinsic meaning. The humanists, in contrast, take the somewhat less anxiety-evoking position that each of us has within us a nature and potential that we can actualise and through which we can find meaning ... for the existentialist there is nothing that we 'are', no internal nature we can count on... (Corey, 1991: 206)

Heidegger's View

Although authenticity, or rather inauthenticity, is often associated with Sartre's (1958) concept of acting in bad faith, it is Heidegger (1927/1996), whose views I shall now explore, who is responsible for the notion of authenticity, as it is used in existential therapy.

Heidegger considers the nature of authenticity in his exploration of existence, in *Being and Time*, in which he refers to human existence as Dasein (usually translated as 'being there'). Heidegger sees authenticity not as being true to one's self, but as being true to existence. In other words, authenticity is being open to, or facing, the 'givens' of existence, including our 'throwness' and inevitable death, whilst inauthenticity equals turning away from or denying them. As Cohn puts it, 'Failing existence is living inauthentically - and we will inevitably fail it time and again.' (Cohn, 1993: 51)

According to Heidegger, authenticity and inauthenticity are two different modes of being, with the possibility of either being equal. However, as Cohn hints above, inauthenticity is seen as the condition that dominates most of our experience. Indeed, as van Deurzen explains, for Heidegger authenticity 'has to be retrieved from inauthenticity' (1999: 116) and 'has to be hard earned on a daily basis.' (ibid.)

For Heidegger, because Dasein is always 'being-in-the-world' (hyphenated to emphasise the connection), understanding what it means to be authentic or inauthentic is related to our connection with the world and with others, a relationship he describes as 'Care'. According to Heidegger, 'Care' cannot be directed towards our self and is not about compassion, but rather describes our inevitable involvement with the world and others, i.e. we are inescapably linked to others, and our lives and futures are inevitably entwined. Thus we cannot avoid 'Care', and because of it, we have a sense that 'something is always wanting, always missing from our being-in-the-world' (van Deurzen, 1999: 119) and this sense makes us anxious.

For Heidegger, inauthenticity, when applied to our relations with others, can be understood as a state in which Dasein has 'fallen' into the world of the 'They', a term he employs in a similar way to Nietzsche's idea of the 'herd'. Living in this way, what Heidegger describes as 'average everydayness' leads to inauthenticity, because it restricts one's possible options and thus one's potential, '...to what lies within the range of the familiar, the attainable, the respected - that which is fitting and proper' (Heidegger, 1996:239). The result of this is alienation, and a closing off from Dasein of its possibility, and with it, its authenticity (Heidegger, 1996). The temptation to fall in with the 'They' is however great, because it brings Dasein a comforting sense of tranquillity. Falling in with the 'They' means that we do not experience the same anxiety as we do when we acknowledge our freedom and make our own choices. Indeed, there is an illusion of escaping the burden of responsibility for our actions because we

have followed the dictates of others or of 'Society'. As Heidegger puts it,

> The supposition of the 'they' that one is leading and sustaining a full and genuine 'life' brings Dasein a tranquillity, for which everything is 'in the best order' and all doors are open. (Heidegger, 1996: 222)

Although our connections with the world and others are indicators of our authenticity, it is ultimately our attitude to death that determines an authentic life or being-in-the-world. In an inauthentic mode, there is a refusal to accept mortality, and instead, death is 'disguised into something that happens to other people' by 'recoining death' as just 'a case of death' in others (Heidegger, 1996: 239). In this way, Heidegger tells us, 'the 'they' covers up what is peculiar in death's certainty - that it is possible at any moment.' (Heidegger, 1996: 30) For Heidegger, the only way to reclaim authenticity is by becoming transparent to our Being-towards-Death, that is, by fully accepting death as an inevitable part of existence. By finding the courage to face our 'facticity' (what cannot be changed), we can find what makes our lives meaningful and vital.

In examining Heidegger's views of authenticity, it is important to note that he does not see inauthenticity as an unacceptable mode of being, but rather as, an inevitability. Indeed, he states that

> We would misunderstand the ontologico-existential structure of falling (inauthenticity) if we came to ascribe to it the sense of a bad and deplorable ontic property of which, perhaps, more advanced stages of human culture might be able to rid themselves. (Heidegger, 1996: 220)

Is Authenticity Possible?

In turning now to consider whether authenticity is possible, I wish to focus on two areas: firstly whether it is possible to live an authentic life and secondly, whether it is possible to have or achieve authenticity in a therapeutic context. I shall begin with an exploration of the first.

In order to know if we can achieve authenticity, it seems safe to conclude that we have to be able to recognise authenticity when we experience it. Cohn (1997) is wary of the assumption that this is in fact possible. He considers those interpretations of 'authentic' as meaning genuine, where the implication is that it is possible to distinguish the genuine or the authentic from the fake or inauthentic. He points out that, whilst this is difficult enough to do within the art world (for instance the Vermeer forgeries went undetected by many) it is much more difficult, if not impossible, when we talk of actions and feelings. Cohn asks,

> What are the reliable criteria which entitle us to call an action or a feeling inauthentic? When we judge

somebody's friendliness to be false, we are talking of our own impressions, which may be influenced by many factors - not least by our own feelings. (Cohn, 1997: 122)

Van Deurzen's view is that it is possible to achieve authenticity, but not as an entirety: inauthenticity is also important. Indeed, it is inauthentic to imagine that we can escape from inauthenticity completely. 'People are ontologically doomed to experience inauthenticity, because of the essential structure of care' (Van Deurzen, 1999: 122) To be able to take ourselves away from the world of others, and to avoid being fallen with the 'they', would require that we were superhuman. Thus, as van Deurzen sees it,

> The best human beings are capable of is to face up to their essential nullity and inauthenticity and engage with the struggle to be authentic as often and as efficiently as they possibly can. (Van Deurzen, 1999: 122)

As well as understanding that authenticity is a matter of degree rather than an absolute, it seems that we also need to consider how the level of authenticity can vary in different areas of our lives. Grieg (1997), for example, explores how authentic awareness varies within the personal worlds of the umwelt, mitwelt, eigenwelt and uberwelt (terms used by Binswanger and van Deurzen to describe our physical, public, social and spiritual lives). As he sees it, it is the mitwelt or the 'public world' which is the dimension most 'directly associated with Heidegger's concept of authenticity. For it is by immersing oneself in the soporific values of the public world that one becomes inauthentic.' (Grieg, 1997: 106) In other dimensions it is likely that there will be more authentic awareness.

On the question of whether authenticity is possible in therapy, there are at least two points that warrant consideration. Firstly, as Brazier (1992) notes, therapy itself is an artificial practice. Secondly, there is the question of whether the therapist's own authenticity as a person, rather than as a therapist, has any bearing on achieving authenticity in therapy.

On the issue of the artificiality of therapy, as Brazier puts it, 'Being paid to care has a false ring to it.' (Brazier, 1992: 89) and thus the therapist is potentially in an inauthentic role. The question Brazier poses is whether such an inauthentic role can be conducive to authentic therapy. Brazier goes on to suggest other obstacles to authenticity in a therapeutic context. As he sees it, the therapist inevitably comes under pressure from his clients to be inauthentic, in that clients often invite the therapist to collude in their inauthenticity. Indeed, he suggests that from the client's perspective 'the therapist who does not collude with me will certainly not get my favour!' (Brazier, 1992: 89)

On the second point, Brazier cites Heaton's exploration of philosophical therapy, in which he states that because the philosopher's therapy rises out of his life, how he lives and

indeed how he dies are essential in any consideration of the therapy's effectiveness. Thus, if the therapist is not 'cured' of, what he terms, 'diseases of the soul', such as greed, envy and ambition he cannot hope to cure others. (Heaton, 1990) What Heaton has highlighted, according to Brazier, is the question that, "If we ourselves are not authentic in our being in the counselling situation, can we hope to really help our clients?" (Brazier, 1992:90) A point that is perhaps understood by those professional bodies such as the BACP and the UKCP, as highlighted by their insistence on trainee therapists undergoing their own therapy before they can become accredited practitioners.

The Effects of Authenticity

If we assume that some level of authenticity is achievable, is it then desirable? To consider this question requires an exploration of the effects of authenticity (both negative and positive). I shall limit the focus of this next exploration to the existential perspective of authenticity based on Heidegger's concept, as it is this view rather than the humanistic view associated with Rogers which seems potentially incompatible with alleviating distress.

Authenticity, according to existentialists, requires us to acknowledge our freedom, which inevitably leads us to what Brazier calls 'disagreeable conclusions', for example, that there can be no certainty. This conclusion in turn, leads to anxiety. Thus taking an authentic stance is seen as anxiety evoking, as well as leading to what Heidegger calls 'uncanniness', a sense of 'not being at home'. (Heidegger, 1996: 233) However, whilst awareness, or being open to existence, involves suffering or angst, attempts to hide from existence are never totally successful, and so also lead to suffering. For example, failing to accept our freedom to choose our own way, rather than fall in with the 'they' leads us to experience guilt (Cohn, 1997). Sartre tells us that 'There is no doubt that authenticity demands much courage and more than courage.' (Sartre, 1958: 90), but Brazier points out that the alternative to accepting the responsibility, guilt and anxiety involved in living authentically means that we 'annihilate the soul' (Brazier,1992: 87).

Given that there seems little dispute that taking an authentic approach involves anxiety, it seems important to consider the implications of this anxiety, in particular for mental well-being. According to van Deurzen,

> Unlike many established forms of psychology and psychotherapy existential therapy does not consider anxiety to be evidence of pathology but rather of the essential reminder of our vibrant and dangerous aliveness. (van Deurzen, 1988: 179)

Further, there also seems to be consensus among many current existential therapists, (Cohn, May, F. Strasser, van Deurzen, Yalom) that whilst the awareness essential for authenticity, and in particular awareness about our own

mortality, leads to anxiety, 'It is not anxiety, which ... can cause psychopathology (or for that matter inauthenticity) but rather an individual's efforts to defend against it.' (Grieg, 1997: 103)

In his consideration of this point Cohn gives examples of links between what he calls 'inauthenticity and particular forms of psychological disturbance' (Cohn, 1997: 126). As he sees it, if we do not acknowledge the 'givens of existence', a number of inauthentic attitudes may result, including 'idealisation, resentment, confusion, a lack of direction.' (Cohn, 1993: 54) which may itself have '…disturbing and even destructive consequences.' (Cohn, 1997: 126). One example Cohn gives is that of living in the world with others. For him, awareness of our relation with others is an important aspect of being authentic, and whilst he recognises that this is often difficult, and that sometimes there is a great temptation to escape into apartness, as he sees it, 'Many forms of psychological disturbance have their roots in this escape.' (Cohn, 1993: 54) Van Deurzen also makes the link between people hiding from the truth about themselves and ensuing vulnerability, with a 'drift away from self- knowledge and into pathology.' (Deurzen, 1990: 10)

Thus far, the discussion has centred largely on the negative effects of inauthenticity. It should also be noted that authenticity may provide positively beneficial effects. Strasser and Strasser (1997) point out that although the anxiety generated by authentic awareness is often experienced as painful, there are also positive aspects to it, indeed, as they put it, joy may be the 'other side of the same coin'. (Strasser and Strasser, 1997: 114) They cite Rollo May, who writes:

> when a person has hit bottom, i.e. when he has reached ultimate despair he then can surrender to eternal forces… giving up the delusion of false hopes and, thus, acknowledging fully the fact of destiny. Then and only then can this person begin to rebuild himself. … freedom begins only when we confront destiny. (May, 1981: 236)

Irvin Yalom (1980) puts forward yet another case for considering the potential benefits of authentic awareness. He considers the conclusions from a study, carried out by Noyes, of 200 people who have had near death experiences. The study found that for the great majority, '…their increased death awareness had been a positive experience resulting in a greater sense of life's preciousness and a constructive reassessment of their life's priorities' (Yalom, 1980: 173).

Van Deurzen too suggests that there are positive effects from taking an authentic approach to life. In particular, she sees authenticity as enabling one to find meaning in the journey towards one's goals, rather than just in their accomplishment. She further argues that an authentic stance gives a sense of increased vitality to life.

Is Authenticity compatible with alleviating distress?

One difficulty in considering this question is that, as Cohn (1997) points out, promoting authenticity does not necessarily imply a single goal, indeed different therapists might consider they are working with authenticity in mind, yet have quite different areas of focus. For example, Cohn cites two ways in which therapy could bring about a more authentic way of being,

> … it could enable us to accept the inevitable characteristics of existence - like our being in the body, being with others, the necessity of choice, the certainty of death. But it could also help us to affirm the possibility of choosing our own specific responses to what is 'given'. (Cohn , 1997: 125)

Further, it appears that as well as needing to have some common understanding of authenticity and its effects, we also need some understanding of what might be involved in alleviating clients' distress. In response to the latter, there seem to be two obvious positions: firstly we might attempt to relieve symptoms, and, secondly, we might seek to diminish the experience of further angst.

From the existential perspective, symptom relief and attempting to escape discomfort may actually be seen as leading to inauthenticity, a state which, if too encompassing, may, as we have seen, lead to greater suffering, and according to some, even psychopathology. Thus, while it has been acknowledged that an authentic approach is likely to precipitate anxiety, existential therapists (van Deurzen, 1988, 1990, 1997, Strasser, 1997) argue that it is better for the therapist to enable the client to realise that angst or existential anxiety is a *sine qua non* of human experience, and thus help him or her find the resilience needed to face rather than hide from it.

As for attempting to alleviate the client's distress by avoiding the experience of further anxiety, from an existential perspective we cannot guarantee to do this. As van Deurzen explains using the concept of 'limit situations' (Jaspers 1951), 'Death, chance, guilt and the uncertainty of the world imply that we will suffer sooner or later.' (van Deurzen, 1990: 12) Thus, as we cannot hide from the givens of existence, it is better to find the courage to face them through choice, rather than have them thrust upon us. Some existential thinkers go further, holding the view that suffering and the poignancy of our limitations keeps us real and alive. (van Deurzen, 1990) In doing so, there is a suggestion that some suffering is a good thing, and perhaps what we really need to think about is what constitutes distress.

Another view, already discussed above, is that the experience of increasing vitality and meaning in one's life, which comes with taking an authentic stance, will in the longer term alleviate distress, an idea which seems to hint at the notion of shorter term pain for longer term gain.

If promoting authenticity is not then incompatible with alleviating a client's distress, can it be considered a goal for therapy? Perhaps. There are, though, still further considerations. Firstly inauthenticity is also a necessary part of being, thus clients are just as much themselves, and not some false self, when they are 'fallen' or inauthentic. Indeed, van Deurzen recommends that considering how individuals are themselves in their inauthentic modality, 'needs to be recognised and understood before anything else.' (Van Deurzen, 1999: 123). Further, she warns that to strive 'for pure authenticity would alienate us as much from our fundamental being-in-the-world as remaining inauthentic.' (ibid.)

Secondly, it must also be remembered that authenticity, in existential terms, is not a dichotomous experience. We can be both inauthentic and authentic at the same time, to varying degrees, and in different areas of our life. As van Deurzen puts it,

> Good psychotherapy constantly reminds the client of the paradox of living and enables the person to live creatively in the tension between authenticity and inauthenticity. (Van Deurzen, 1999: 124)

Conclusion

This paper has considered a number of questions about authenticity, not least of all what is meant when we speak of 'being authentic'. To this end, both the Rogerian and existential views have been explored, and during the course of this exploration key differences between the two approaches have become apparent. In particular it has been noted that whilst for Rogers, authenticity, or to use his term, 'congruence', is compatible with alleviating distress - indeed he sees it as one of three essential core conditions required for therapy to take place (Rogers, 1980) - for the existentialist, authenticity and its repercussions for therapy are somewhat more problematical.

Through examining the existential concept of authenticity as influenced by Heidegger, it has been acknowledged that taking an authentic stance can lead to anxiety; this has meant considering whether promoting authenticity as a therapeutic aim is compatible with alleviating distress, and thus whether it is a 'good thing'. By considering some of the existential arguments about the importance of anxiety, in which it is not considered a pathology but inevitable and essential for a vital life, as well as the points about the dangers of inauthentic living, I have attempted to unravel some of the complexities of this question.

It has been argued that from the existential point of view, an understanding of authenticity reminds us what life should be about, enabling us as therapists to recognise a

client's project, and enabling them as clients 'to grasp the purpose and meaning of their reality.' (Deurzen-Smith, 1997: 184) Further, questions have been raised about what it means to alleviate distress, and indeed whether this is itself necessarily a 'good' therapeutic aim.

To conclude then, what I hope this paper has illustrated is that, from the existential perspective, whilst there are no absolutes on the question of authenticity, there is much to be gained from encouraging or enabling a client towards a more authentic path. As Cohn states, by exploring how the client's distress is rooted in distortion or denial of the givens, and by then conveying this impression and talking it through, the therapist '… may lead the client to a new understanding and the possibility of a new response.' (Cohn, 1997: 126) This possibility of change for the client, and the opportunity to discover a more vibrant and life affirming way of being (May, van Deurzen, Yalom), surely makes striving for greater authenticity, though it may only be possible in fleeting moments, a worthy goal in therapy.

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