ABSTRACT

This article discusses the relationship between cinema and existential psychotherapy. As each scene in a film is exposed, a character’s psyche is illuminated. So it can be said of the encounter between the client and the therapist: each moment an opportunity to elucidate the client’s psyche. Accordingly, a film concerning an elderly man’s search for meaning is a reflection of a journey that each of us must embark on, both professionally and personally. This paper focuses on Director Ingmar Bergman’s film Wild Strawberries as an illustration for the therapeutic encounter. The paper examines Bergman’s film in the context of the psychosocial and cultural questions that challenge our aging population, and how some of these issues may be explored in the therapeutic setting. It argues that as therapists we must be mindful to the needs of our older clients, without being patronizing, and to further our acceptance of growing older in a culture that values the pursuit of youth above all else.

The choice of a motion picture as a wholly significant expression of human existence may appear ostensibly indulgent in an essay in which the tenets of therapy are to be discussed. Yet is it not the gestalt of a client’s life that we as therapists assign our artistic and scientific considerations? Had we ought to take into account that artistic works, whether literature, music, painting or in this case, film, have a way of presenting in a highly compelling structure some whole truths regarding the narratives that chronicle our lives and those of our clients? In a few hours, and on less than 8,000 feet of processed celluloid, life histories are revealed, analyzed and deconstructed in a method that rarely transpires in the stillness of the therapist’s office. Thus, it is noteworthy for therapists to reflect on the creative dynamics of the therapeutic relationship and how life, as it concludes in old age, is not quite as disconnected from drama, myth, and metaphor as we once believed. Character and growth seem to shine brightest in our twilight years.

As each scene in a film is exposed, a character’s psyche is illuminated. So it can be said of the encounter between the client and the therapist: each moment an opportunity to elucidate the client’s psyche. Accordingly, a film concerning an elderly man’s search for meaning is a reflection of a journey that each of us must embark on, both professionally and personally.

A simple, yet extraordinary voyage through one man’s past, Wild Strawberries (1957) calls to the fundamentals of being, which make each of us uniquely human. Professor Isak Borg (Victor Sjöström) is an elderly man who has created a successful career as a medical doctor, first in practice then through research. On the eve of his 77th year of life he is to be honored as Professor Emeritus at a university in Sweden. This is all we know of Isak during the film’s opening monologue,
but in the moments leading up to film’s final image, we will be familiar with his deepest fears and his greatest loves. Director, Ingmar Bergman, understands the interplay of core existential issues as he gently models Borg’s past, present and future through memories, fantasies and dreams. And not unlike a therapist, Bergman, skillfully edits to the heart of the character’s malaise, an old man in search of his life’s meaning, which became lost in his life’s work.

“At the age of seventy-six, I feel that I’m much too old to lie to myself.” And so begins Dr. Isak Borg’s opening statement to himself and the viewer. All he desires from life is to be “left alone” and to have the opportunity to dedicate his remaining time on earth to the few things that concern him. He mentions detective stories, golf and his “beloved science”: bacteriology. This is Isak’s only use of the word beloved throughout the film, and as we shall see, it speaks volumes for his past and present character.

Isak is the last of 10 children. His wife, Karin, died years ago and the connection he has with his only son Evald is estranged. Dr. Borg impersonally catalogs his relationships in terms that are better suited for laboratory research. Still, his dreams are not as rigidly ordered and enumerated. Here, in this dreaming world, Bergman begins to illuminate the human qualities of Isak. The dreams tell us much about Isak’s desires and wishes and each unfolding moment supports the basic principles of a phenomenological and existential understanding of the human condition. That is to say, meaning, death and freedom are Bergman’s tenets; these too are the constructs of existentialism.

Existentialists argue that we are not born to be anything in particular, but we become who we are through our commitments to choice and action. We make choices and then accept complete responsibility for the choices we have made. Specifically, existentialism emphasizes existence over essence.

To explore deeply from an existential issue does not mean that one explores the past; rather it means that one brushes away everyday concerns and thinks deeply about one’s existential situation. It means to think outside of time, to think about the relationship between one’s feet and the ground beneath one, between one’s consciousness and the space around one; it means to think not about the way one came to be the way one is, but that one is (Yalom, 1980, p11).

Accordingly, existential psychotherapy can be described as a dynamic encounter between the therapist and the client that centers on the client’s responsibility for choices, actions and behaviors; finding personal meaning in a meaningless world; coping with anxiety; and living with others-in-the-world. This therapeutic encounter attends to freedom (choice), guilt (regret over choices), anxiety (tensions within), isolation (aloneness), and meaninglessness (meaning as a personal construction) (Yalom, 1980).

Clients craft their stories as they detail their futures and pasts. “Each of us is forced to do deliberately for oneself what in previous ages was done by family, custom, church, and state, namely from the myths in terms of what we can make some sense of experience” (May, 1992, p29). Narratives provide us with insight and meaning. Likewise, stories and myths
facilitate in helping clients better understand events in their lives. A client’s history is gathered, but is not explained or labeled. Instead, the therapist is viewing the client’s history through the client’s lens – their phenomenological awareness – rather than focusing on pathological development. When a therapist is aware that narrative brings focus and order to a client’s world -- providing meaning, value and hope -- a respectful understanding of that client illuminates in the darkness. “Healing through narration is an opening up involving an existential act of self-transcendence of an embodied person who organizes his or her experience in time” (Mishara, 1995, p.180).

During the second act of Wild Strawberries, Isak and his daughter-in-law Marianne (both traveling together by car to the university ceremony) pick up three young people - one female and two males - hitchhiking their way to Italy. The carefree female, who strongly resembles Isak’s first love, Sara, says to Isak that she cannot think of “anything worse than getting old.” The two young males, one studying to be a priest the other a doctor, argue endlessly as to which is more important science or religion. Consequently, this younger generation of passengers expound the questions that haunt Isak’s dreams—his choice of self in the role of doctor. He must face this before he can face the existential self of old age.

The endeavor to remain young is critical to collective modern thought. The movement toward eternal youth infiltrates our psyches to the extent that we no longer consider growing old an option. In this unhealthy state of denial, we as a culture have fashioned a collective anxiety that pursues youthful actions and accomplishments with sightless vitality while consequentially avoiding the nature of death. As a result, adults cling to childhood and adolescence as the definitive developmental stage. Challenged with life choices that are void of meaning and faced with an unforgiving culture of youth, the elderly are often presented as foolish antiquities that need to be carted between family functions and physician appointments - and as reminders for the young to never grow old. It is then no wonder that the aging have the fastest growing number of completed suicides.

Each year more than 6,300 older adults take their own lives. Older adults have the highest suicide rate – more than 50 percent higher than their young counterparts. Suicide is rarely, if ever, caused by any single event or reason. Rather, it results from many factors working together, which produce hopelessness, anxiety and depression. Because suicide for the older person is typically not an impulsive act, a window of opportunity exists to intervene (Source: NAMI).

When faced with one’s mortality, the mind is anything but quiet, and our aging population is certainly no exception. The worry, fatigue and somatic aches the aging suffer may be manageable but not always tolerable. Yet, it is the loss of meaning or lack thereof, which evokes much discontent within older adults. The avoidance of anticipatory grief only accelerates the anxiety.

Not unlike a skilled filmmaker, a competent therapist will draw on many sources, none of which is more important than understanding the whole person. Accordingly, when an older client and therapist explore issues of mean-
inglessness, a review of the client’s life can be utilized as a means of reengaging that individual with her or his world. Existentialists argue that freedom is shadowed by responsibility. Specifically, clients have the ability to regain control of their lives by honoring their suffering rather than being controlled by it.

Every individual has a function within her own existence, and through therapy one can realize this role rather than be disengaged from it. In the basic model I have developed below, sphere A represents a client’s healthy engagement, a give and take relationship with his or her world. Conversely in sphere B, we see that this sense of engagement is interrupted, and the links of engagement are blocked. Consequently, the client withdraws and isolates from her world. With depression the client loses interest in things she once found enjoyable, and although the individual may continue to function “normally” in daily activities (note that there is still engagement as observed in the opposing arrows) the disruption causes a marked increase in anxiety, loss of freedom and frustration as it becomes increasingly more difficult to connect because of the obstruction.

Based on this model, life is as meaningful as what is ascribed to it. That is to say, what the client takes from the world and what is given back creates a flow or oscillation between the two spheres. Everything that is the client: choices, behaviors, actions, beliefs, spirituality, values and so forth are encapsulated in sphere A. That which the client has no control over, namely his or her socio-cultural factors, are summarized in the sphere B. This is where most clients try to enact change and expend an exuberant amount of energy. Unattended, mental energy, being finite, will eventually extinguish itself and leave the client in a void that can be filled only with questions of “Who am I?”, “What does this all mean?” or the case of an aged person, “What did this all mean, and where do I go from here?”.

Isak’s ruminations correspond to the essential principles of existential theory, and in this way Bergman and therapists share a universal canvas. Great art and great psychotherapy parallel one another in their mutual call for dramatic tension. This dynamic conduit allows us as therapists to organize much of the logos of being we have come to map through existential thought. Indeed, Isak’s dreams seem to formulate their own profound and meaningful logic when revealing their own historical narratives. In one moment, Isak is back in the strawberry patch close to the old family house and in the next instance in his classroom in medical school. Is this progression of images finally forcing Isak to reexamine old age? “At the age of seventy-six, I feel that I’m much too old to lie to myself,” he tells us. These dreams are hardly Isak’s entire developmental history, yet they are what they are in terms of narrative, meaning and intention. It would appear that the dreams
are doing for Isak what his waking psyche is incapable of, specifically confronting those deeply meaningful concerns of one’s mortality as authentically as one can.

“In the dream we see the whole man, the entirety of his problems, in a different existential modality than in waking, but against the background and with the structure of the a priori articulation of existence, and therefore the dream is also of paramount therapeutic importance for existential analyst” (Binswanger & Boss, 1983, p.285). Dreams augment insight and “deepen one’s self-perception” (Kuiken, 1995, p. 129). Dream work provides the opportunity for client and therapist to better view the client’s being-in-the-world and to understand the possibilities of existence through the dream – a window to the unconscious or a door to the potential of authenticity.

What significance has life if it is depleted pursuing self-serving needs? If the majority of our younger years are exhausted in achieving material success and status, then it is our twilight years that often suffer bankruptcy. Higher order values are achieved when an individual makes an equal attempt to engage with others-in-the-world for the sake of others and takes pleasure in nature and creativity while courageously facing life’s struggles. Here is the apex of the human condition, and where I propose existentialism has been long overlooked as a therapeutic choice. If lack of meaning is the cause of such unrest in our aging population, then we must look at what it means to grow old in our culture and how we can illuminate meaning through narrative and become conscious of our future potential. Victor Frankl applied the phrase anomic depression when he described an affective reaction to lack of meaning in one’s life, but it is his explanation of a “Sunday Neurosis” (Frankl, 1959, p112) that I wish to highlight here in relation to the back years of one’s life. That kind of depression which afflicts people who become aware of the lack of content in their lives when the rush of the busy week is over and the void within themselves becomes manifest. Such widespread phenomena as depression, aggression and addiction are not understandable unless we recognize the existential vacuum underlying them. This is also true of the crisis of pensioners and aging people (Frankl, 1959, p112).

It would seem that acknowledging the existence of such a “vacuum” would improve one’s sense of well being. According to Frankl’s method, years of ignoring meaning in one’s life leads to symptoms of anxiety and depression, which make it difficult for the client to isolate where the true problem lies. The will to pleasure is masked by a frustrated will that cannot see the forest through the trees as it were. Where void exists in a client’s life, symptoms will pour in to fill it. Over time, worry, fatigue and low-level depression make life miserable for the client.

Driving down a winding path, a large abandoned summerhouse emerges from among the trees and overgrown vegetation. Isak reveals to his Marianne that this is the house in which his family spent the summers of his youth. He begins searching for a particular spot where there had once been a patch of wild strawberries. Disinterested, Marianne walks down to the lake for a quick swim. Now alone, Isak sits down to eat some berries, as if the taste of the fruit could reconcile his
troubled memories. As a result, real-time and illusory images begin to merge. He suddenly sees Sara, a one-time love, gathering strawberries. And then, he sees his older brother Sigfrid running down the hill. His brother quite abruptly and crudely asserts that he is going to kiss Sara. She reminds Sigfrid that she is “secretly” engaged to Isak. He ignores her protests and suddenly and forcefully kisses her. Sara cries out, spilling the strawberries which create a symbolic red spot on her dress. Not dissimilar from his existent life, Isak can only watch. He is not capable in the slightest way of participating in an event, real or imagined, and whether this memory is accurate or fantasy is inconsequential. Isak is unable to intervene, and is left with nothing but a faded recollection of what once was.

Even though there would appear to be a cry for meaning from our older clients, few clinicians seem to be listening. Existential therapy offers the suggestion that life is not a tensionless state, nor does it respond well to psychology as science. Rather, it is a creative journey seasoned with responsibility and choice. A number of today’s clinicians, most trained in empirically validated theories, will perceive this approach as pseudoscience, or will be uncomfortable with its lack of structure and technique, and that could offer an explanation as to why it is not more often employed in clinical and academic settings.

One of the criticisms leveled at any depth, existential or phenomenological approach is a lack of supporting research. There are few outcome-based evaluations that can support an existential approach. On the other hand, how do you objectively quantify something that can’t be measured? Existential therapy is hardly linear in its approach. Like other depth approaches to therapy, it rests in the gap linking science and philosophy, but cannot rely on statistics and systematic testing to demonstrate itself.

Distress is viewed as a human accomplishment and guilt an opportunity for change. The susceptibility a client feels during the therapeutic relationship motivates her or him toward authenticity. This type of real change is a process, not a quick fix. Meaning is gained from creative endeavors within the world, and transformation is cultivated within the client by appealing to his or her unique situation and humanness. Meaning cultivates values, which, in turn, supplements a client’s sense of self, which then diminishes anxiety. The therapist subsequently illuminates past achievements and strengths, while alluding to the potential of future endeavors of creativity, experience and attitude toward one’s role in the world. When used with an aging client, the therapist can address issues of mortality in a creative and meaningful fashion.

Dreaming, Isak is escorted into a classroom where the instructor points to a microscope and asks him to identify a bacteriological specimen. All Isak can see in the microscope is his own enlarged eye: “I can’t see anything.” Then the instructor gestures to the blackboard and asks him to read something printed on it in unfamiliar letters. Isak struggles, but cannot read the language. The instructor translates it for him: “A doctor’s first duty is to ask forgiveness,” and concludes, “You are guilty of guilt.” Isak is unaware of the existential meaning of the instructor’s remarks. He tries to find excuses: the microscope is broken; he is a medical doctor, not a linguist; and fi-
nally he states that he is an “old man with a bad heart” (a symbolic turn of phrase?). The instructor asserts that there is nothing cataloged about Isak’s “heart” in the examination book and continues with the assessment. He lights a lamp over the face of a woman and asks Isak to diagnose her. Isak declares “She is dead,” just as the woman erupts in loud, mocking laughter. The instructor’s concluding remarks for Isak: “You’re incompetent.” This conclusion bewilders Isak. Never before had he failed an examination. The instructor adds, “You are accused of “indifference, selfishness, and lack of consideration.” All of this is in direct reference to Isak’s long dead wife, Karin. The instructor leads Isak into a forest where they witness Karin in the company of another man. Again, Isak can only watch with detached curiosity and confusion. The instructor continues with his critique of Isak’s psyche, “A surgical masterpiece, everything has been dissected.” “It is a perfect achievement of its kind.” Isak then asks what the consequence of his performance will be, and he is told: “Loneliness, of course.”

When a client surrenders their old selves by exploring the unknown, they also consign an excessive amount of faith in their therapist. The therapist needs to answer, in turn, with an equivalent amount of faith in the client. Support can be provided by empowering the client to recognize this shift. Therapists must continuously be familiar to unresolved issues in therapy. Mourning disillusionment, disengagement and years of emotional struggle, the client sustains growth.

Closure begins when the therapist and the client recognize that their relationship is terminal. Both will eventually face the loss of the other and that termination will require authenticity and a willingness to be present, as this represents a very real death to both individuals. Investigating the parallels associated with every other loss in life of the client can assist the therapist with an effective intervention that describes the reality that all things must die and that this fact is consistent in all relationships.

In the final moments of Wild Strawberries, Isak drifts back again to the summerhouse and the strawberry patch and to everything that he dreamed and experienced that day. He envisions a warm, sunny day with a gentle wind coming through the trees. Down at the lakeside, his sisters and brothers are preparing to launch a small sail boat. Sara comes running up the hill to Isak.

Sara: “Isak, darling, there are no wild strawberries left. Aunt wants you to search for your father. We will sail around the peninsula and pick you up on the other side.”

Isak: “I have already searched for him, but I can’t find either Father or Mother.”

Sara: “Your mother was supposed to go with him.”

Isak: “Yes, but I can’t find them.”

Sara: “I will help you.”

Sara takes him by the hand and leads him to a narrow inlet near the deep, dark water.

Isak: “I dreamed that I stood by the water and shouted toward the bay, but the warm summer breeze carried away my cries, and they did not reach their destination. Yet I wasn’t sorry about that; I felt, on the contrary, rather lighthearted.”

Isak drifts into a peaceful sleep and presumably for the first time is his 77 years he
has come to realize the meaning of his life through the eyes of a man rather than the role of a doctor.

In today’s managed healthcare system where traditional therapies - in their twilight years quite like Professor Isak Borg – have conceded to empirical validated therapies that provide quick fix solutions, existential and phenomenological therapies present a refreshing and needed alternative. Of course not every theoretical approach is suitable for every client, nor is it appropriate for every therapist. It requires an enormous commitment on the part of the client, as she or he will be subjected to periods of reflection and self-examination that will be uncomfortable and perhaps even frightening. Moreover, existentialism focuses on the subjective experience, which may disengage some clients who are in search of specific direction and solutions to their issues.

Existential therapy remains, however, a unique and thoughtful approach that may allow an individual an opportunity to regain control of his or her life by assigning meaning through engagement and understanding. Isak uncovers meaning in the rich soil of a strawberry patch. As therapists, we have an obligation to cultivate the metaphors and myths of our clients’ life narratives and to dig in the dirt of our clients’ secret gardens.

The therapist’s goal, then, is engagement. The task is not to create engagement or to inspirit the patient with engagement—these the therapist cannot do. But it is not necessary. The desire to engage life is always there within the patient (Yalom, 1980, p 482).

A healthy sense of engagement with others-in-the-world is the objective of both client and therapist. In a way, the therapist’s office setting can be a smaller, experiential stage for the client’s world theatre.

REFERENCES