

Applied Philosophy, Applied Psychiatry: Ludwig Binswanger and the Birth
of Existential Analysis

Ludwig Binswanger was born into a prominent family of Swiss-German physicians and psychiatrists on April 18, 1881. In 1857 his grandfather, also named Ludwig, founded Bellevue, a sanitarium for the treatment of psychiatric and nervous disorders. A pioneer in the burgeoning “non-restraint” movement, Ludwig sought to treat patients without the use of mechanical restraints such as straitjackets. Immortalized – irreverently if accurately – in Joseph Roth’s *Radetzky March* as that “institution on Lake Constance where pampered lunatics from wealthy homes are gently and expensively treated and the staff are tender as midwives,”¹ Bellevue operated as a kind of open-house in which patients and their families lived on-site in private apartments and treatment was always at hand. The aim, as Binswanger put it, was for the doctor’s entire family to be “placed at the disposal of the sick, so that we have a combination of open clinical handling with family care in the strictest meaning of that word.”² Bellevue was also a family business in a more conventional sense: following Ludwig’s death in 1880, Binswanger’s father Robert took control, followed by Binswanger himself in 1910. Binswanger’s uncle Otto, meanwhile, was the first professor of psychiatry at the University of Jena, as well as the director of its mental asylum; it was in this capacity that Otto treated Friedrich Nietzsche during the latter’s incarceration between 1889-90.

Having studied medicine in Lausanne, Heidelberg, and Zurich, Binswanger’s career began in 1906 as a student of C. G. Jung at the famed Burghölzli Clinic in Zurich. In 1907 Binswanger completed his medical dissertation, and in February of that year he accompanied Jung on a visit to Vienna, meeting Freud for the first time. Although trained as a psychiatrist, Binswanger was, initially at least, profoundly impressed by Freud, and by the mid-1910s he had succeeded in turning Bellevue into one of the most psychoanalytically-oriented psychiatric clinics in Europe.³ By the start of the 1920s, however, he had come to believe that psychoanalysis had reached an impasse. Psychoanalysis had emerged from within a

¹ J. Roth, cited in Gerhard Fichtner, ‘Introduction’ in *The Sigmund Freud-Ludwig Binswanger Correspondence, 1908-1938*, ed. Gerhard Fichtner, trans. Arnold J. Pomerans and Thomas Roberts (Other Press, 2003) p. xiii.

² L. Binswanger in *ibid.*, p. xi.

³ Although the historic differences between psychiatry and psychoanalysis are complex, for our purposes it will suffice to say that psychoanalysis was, at the beginning of the twentieth century, merely one – if by far the most

nineteenth-century scientific paradigm that prioritized physiology over psychology – the ‘brain-mind’ distinction – in accounting for mental disturbances. Originally trained as a neurologist, Freud was himself deeply indebted to this physiological tradition and had studied under Ernst Wilhelm von Brücke, one of the leading advocates of Hermann von Helmholtz’s reductionist approach to biology. Expounding a positivistic understanding of the human being as a reflex-driven site of chemical-physical processes, Helmholtz’s ‘biophysics’ movement dominated European science in the second half of the nineteenth century.⁴

The biophysics movement and its offshoots were also deeply hostile to philosophy, at least as traditionally understood. In order to understand their position, it is necessary to appreciate the monumental impact of Kant’s critical project on all aspects of nineteenth-century German thought; indeed, the decades following Kant’s death in 1804 can perhaps best be characterized as a working out of the implications of his philosophy, culminating in the famous “encounter” between the neo-Kantian Ernst Cassirer and Martin Heidegger in the Swiss resort town of Davos in 1929.⁵ But Kant’s influence went far beyond philosophy alone, as successive generations of chemists, physicists, physicians, and engineers tried to reconcile their endeavours with Kant’s demand for empirically-verifiable and experiential – that is, “scientific” – knowledge. In order to do so, they read Kant as a strict empiricist, deploying him against what they took to be the speculative claims of philosophy, above all Hegelian idealism. In Kantian terms, they aimed at *knowledge* rather than (metaphysical) *ideas*. The positivists embraced Kant not in the name of philosophy, which was deemed antithetical to knowledge, but under the banner of science; their project was a rescue mission aimed at liberating Kant from the muddled thinking of philosophers.⁶

controversial – of a number of potential treatments in the psychiatrists’ toolkit, to be either deployed or ignored according to both the situation and the psychiatrist.

⁴ At the risk of oversimplification, I will henceforth refer to the great variety of physiological mechanists, reductionists, biophysicists, etc. by the shorthand “positivists.” Positivism is here understood as a philosophy of science – a procedural methodology – rather than a substantive doctrine. For more, see H. Stuart Hughes, *Consciousness and Society: The Reorientation of European Social Thought* (Harvard University Press, 1958).

⁵ For more on the Davos encounter, and especially its Kantian context, see Peter Eli Gordon’s *Continental Divide: Heidegger, Cassirer, Davos* (Harvard University Press, 2010).

⁶ The positivists’ position is not dissimilar from that of the twentieth-century Kant scholar P. F. Strawson. According to Strawson, Kant held that “there can be no legitimate, or even meaningful, employment of ideas or concepts which does not relate them to empirical or experiential conditions of their application.” This “principle of significance,” as Strawson terms it, bears a striking resemblance to the positivists’ own reading of Kant’s epistemology. P. F. Strawson, *The Bounds of Sense: An Essay on Kant’s Critique of Pure Reason* (Routledge, 1966) p. 16.

The positivist position had profound and lasting effects for the development of psychology and psychoanalysis. It also helps to make explicable Freud's infamous aversion to philosophy.⁷ In its early years, psychoanalysis was deemed controversial, even scandalizing, by the Viennese medical establishment and bourgeois society at large. In order to establish psychoanalysis on respectable grounds, Freud desperately sought the legitimation of the natural sciences. In keeping with the view adumbrated above, this meant fiercely disavowing any taint of philosophy, which, for Freud, was synonymous with speculative metaphysics.⁸ Moreover, although Freud was far from a crude positivist, he did genuinely believe that a biological approach to the mind would yield the most accurate picture of the functioning of mental processes. Beginning with 1895's *Project for a Scientific Psychology* and continuing a quarter of a century later with *Beyond the Pleasure Principle* (1920), Freud's biologism was the basis of both his dynamic and structural models of the mind.⁹ These models, however, were criticized for privileging 'objective' processes of the brain over the 'subjective' content of the mind, thereby adhering to the positivist prejudice against the unquantifiable.

For Binswanger, Freud's aversion to philosophy and adherence to a positivistic methodology were concomitant errors. The result, Binswanger argued, was a discipline – psychoanalysis – that failed to engage with the subjective individuality of the patient on his own terms. What he proposed in its place was an approach to psychiatry that would draw upon various techniques in the natural sciences, clinical psychiatry, psychoanalysis, and philosophy. The goal of this approach, which Binswanger termed existential analysis [*Daseinsanalyse*], was to create an “anthropological type of scientific investigation [...] aimed at the essence of being human.”¹⁰ By “anthropological,” Binswanger simply means that he is conducting a study of man *qua* man. The method Binswanger proposed for his investigation into the “*being of man as a whole*” was phenomenology.¹¹ It is important to

⁷ There is a considerable body of literature on Freud's and philosophy, the most recent being Alfred I. Tauber's *Freud, the Reluctant Philosopher* (Princeton University Press, 2010).

⁸ Tauber turns this accusation on its head, persuasively arguing that Freud's theories are themselves founded on speculative metaphysics. See *ibid.*, ch. 2.

⁹ For more on Freud's relationship to biology, see F. Sulloway, *Freud, Biologist of the Mind: Beyond the Psychoanalytic Legend* (Harvard University Press, 1979). Sulloway's central claim, relevant to the point being made here, is that Freud remained indebted to biology throughout the duration of his career.

¹⁰ L. Binswanger, 'The Existential Analysis School of Thought', trans. Ernest Angel, in Rollo May, Ernest Angel, & Henri Ellenberger, eds. *Existence* (Basic Books, 1958), p. 191.

¹¹ L. Binswanger, 'Heidegger's Analytic of Existence and Its Meaning for Psychiatry,' trans. Jacob Needleman, in L. Binswanger, *Being-in-the-World: Selected Papers of Ludwig Binswanger* (Basic Books, 1963) p. 211.

understand that Binswanger, following the positivists, took the scientific stipulation very seriously; only phenomenology, he argued, was capable of delivering genuinely verifiable results. “Existential analysis,” he wrote, “is an empirical science, with its own method and particular idea of exactness, namely with the method and ideal of exactness of the *phenomenological* empirical sciences.”¹²

Binswanger’s phenomenology drew widely from both philosophy and biology, but his two most significant influences were undoubtedly Edmund Husserl and Martin Heidegger. Binswanger had enormous respect for Husserl, repeatedly affirming his importance for the early development of existential analysis. He quickly came to believe, however, that Husserl’s conception of phenomenology, though groundbreaking, could not meet the requirements of an anthropologically-oriented, empirically-verifiable science of psychiatry without substantial modification. Husserl’s transcendental phenomenology, Binswanger asserted, left “intentional consciousness,” that is, consciousness *of* something, “suspended in the [...] thin air of the transcendental ego.”¹³ This was problematic because without a coherent framework – or, as Binswanger termed it, “world-design” – within which to interpret phenomenological data, we cannot understand the meaning or significance – the “how” – of a given thing.¹⁴ It was Heidegger’s conception of being-in-the-world that solved this problem by showing “how the intentionality of consciousness is grounded in the temporality of human existence.”¹⁵ Binswanger emphasized the difference between the two approaches in 1946, noting that “today we must strictly differentiate between Husserl’s pure or eidetic phenomenology as a transcendental discipline and the phenomenological interpretation of human forms of existence as an empirical discipline.”¹⁶

Heidegger’s move also helped to overcome what Binswanger termed the “fatal defect of all psychology,” namely, the “dichotomy of world into subject and object.”¹⁷ The subject-object split is especially problematic for psychiatry because the goals of that discipline are

¹² Binswanger, ‘The Existential Analysis School’, p. 192.

¹³ Binswanger, ‘Heidegger’s Analytic’, p. 207.

¹⁴ Binswanger, ‘The Existential Analysis School’, p. 193. Although there is not sufficient space here to develop this further, it is worth noting that Binswanger’s conception of world-design was heavily influenced by Jakob von Uexküll’s biological conception of “environment” [*Umwelt*] as a synthesis of discrete ‘worlds’ interacting within “function-circles.” See *ibid.*, pp. 195-198, 202.

¹⁵ Binswanger, ‘Heidegger’s Analytic’, p. 207.

¹⁶ Binswanger, ‘The Existential Analysis School’, p. 192.

predicated upon the possibility that one individual (the psychiatrist) can have direct knowledge – or, as Binswanger put it, “understanding” – of another (the patient). Although Husserl had been unable to resolve the possibility of direct knowledge of other individuals, Binswanger combined Heidegger’s ontologically-grounded conception of transcendence with Max Scheler’s theory of sympathetic understanding [*Einfühlungstheorie*] to argue that feelings are *intentional* rather than merely subjective experiences.¹⁸ Feelings, that is, can provide us with an intuitive understanding of our standing toward others, but only if the other is understood as a part of a coherent whole rather than isolated from their environment. This new understanding was one of the main achievements of existential analysis; as Binswanger put it, “the much-discussed *gap* that separates our “world” from the “world” of the mentally ill and makes communication between the two so difficult is not only scientifically explained but also scientifically bridged by existential analysis.”¹⁹ He readily acknowledged, however, that this achievement was only possible as a result of Heidegger’s concept of being-in-the-world, according to which, Binswanger wrote, “the split of being into subject (man, person) and object (thing, environment) is now replaced by the unity of existence and “world” secured by transcendence.”²⁰

The phenomenological analysis of world-designs opened up by Heidegger was the crucial step in Binswanger’s new understanding of mental illness. Psychoses such as mania, Binswanger argued, “represent a new norm, a new *form* of being-in-the-world. [...] It is this norm which we call the “world” of the manic.” Such psychoses, he continued, “never become accessible to man except in and through a certain world-design.”²¹ This was an especially important insight because mental illness had hitherto generally been framed in terms of deviations from a healthy norm; by contrast, Binswanger is here arguing that we cannot come to a meaningful understanding of the mentally ill – and therefore cannot adequately treat them

¹⁷ *ibid.* p. 193.

¹⁸ For a more detailed argument for the intentional nature of feelings from an explicitly existential analytic perspective, see F. J. J. Buytendijk, ‘The Phenomenological Approach to the Problems of Feelings and Emotions’, in *Psychoanalysis and Existential Philosophy*, ed. H. M. Ruitenbeck (E. P. Dutton, 1962), pp. 155-178.

¹⁹ Binswanger, ‘The Existential Analysis School’, p. 213.

²⁰ *ibid.*, pp. 193-94. It is important to point out here that Heidegger objected to Binswanger’s transcendental interpretation of his work. Indeed, one reason Heidegger worked so closely with Medard Boss, another Swiss-German existential analyst, was in order to counter Binswanger’s (mis)reading through Boss’s work.

²¹ Binswanger, ‘The Existential Analysis School’, p. 201.

– whilst we continue to think of their illnesses as nothing more than corruptions of a healthy archetype.²² Whereas “psychiatry’s object is [...] the “sick” organism,”²³ existential analysis understands man not “in terms of some theory, be it mechanistic, biological, or psychological,” but rather as a “whole man, prior to any distinction between conscious and unconsciousness, or even between body and soul.”²⁴ Only existential analysis can reveal the “anthropological horizon of understanding” of human beings, because only it is capable of uncovering and illuminating the world-designs of both the “sick” and the “healthy.”²⁵

This was not, however, philosophy’s only contribution to existential analysis. Where phenomenology can be thought of as the *methodology* of existential analysis, its thematic *content* was provided by existentialist themes.²⁶ What they had in common, however, is that both represented examples of *applied philosophy*. In the former case, Binswanger and his fellow existential analysts were actively “doing” phenomenology; that is, they were utilizing phenomenological methods as an integral part of their everyday working practice. Moreover, with their reconstruction of highly elaborate world-designs, exploration of the spatio-temporal dimensions of perception, and emphasis on embodiment, existential analysts like Eugène Minkowski, Erwin Straus, and Roland Kuhn were expanding the boundaries of how phenomenology could be used. The application of existentialism was, in many ways, more inventive still. Drawing on material from figures such as Kierkegaard, Schelling, and Nietzsche, as well as Heidegger himself, Binswanger medicalized classic existentialist themes, transforming literary-philosophical ideas into physiologically-oriented and nosologically-classified mental disorders. What Kierkegaard had described in individualistic terms – the inauthentic aesthete; the ineffable dread of the leap of faith; Job, redeemed by the absurd – Binswanger recognized as a general condition of post-World War I Europe.

Foremost amongst these medicalized existential themes was anxiety, which represents “the delivery of existence to nothingness.”²⁷ Although Binswanger followed Kierkegaard and

²² For a systematic and highly influential treatment of this idea, see G. Canguilhem, *The Normal and the Pathological*, trans. Carolyn R. Fawcett (Zone Books, 1991).

²³ Binswanger, ‘Heidegger’s Analytic’, p. 209.

²⁴ L. Binswanger, ‘Existential Analysis and Psychotherapy’, *Psychoanalytic Review* 45, 1958-1959, p. 83.

²⁵ Binswanger, ‘Heidegger’s Analytic’, p. 209.

²⁶ Although a strict distinction between phenomenology and existentialism is perhaps a false heuristic, especially in the wake of Heidegger’s ontologically-grounded phenomenology, I maintain it here for the sake of clarity.

²⁷ Binswanger, ‘The Existential Analysis School’, p. 205.

Heidegger in declaring that “the source of anxiety is existence itself,” there are important differences between their positions.²⁸ For Heidegger, anxiety plays a constructive and, in that sense, positive role in Dasein’s quest for authenticity. Binswanger, on the other hand, sees anxiety in entirely negative terms as a condition that must be overcome in order to open the possibility of authentic interpersonal relationships. To put it in Binswanger’s terms, anxiety is what arises when an individual’s world-design is deprived of *love*. Although generally neglected by Anglophone interpreters of existential analysis, love is quite possibly the most distinctive, and almost certainly the most important, aspect of Binswanger’s thought. More than just a buttress against the “dreadful” horror of anxiety, the “being of loving encounter” actually constitutes a basic existential structure of human being.²⁹

Love and anxiety are, for Binswanger, intimately connected. States of acute anxiety, for example, are characterized by an absence of love so severe that relationships of any kind are rendered impossible. Binswanger described one patient, a schizophrenic young woman dubbed Lola Voss, as inhabiting “a world-design that is no longer carried by, nor bears any traces of, *love* and *trust*, or of the closeness to humans and things that results from these feelings.”³⁰ Rebuilding the patient’s capacity to experience love is the first step toward staving off anxiety and re-establishing meaningful interpersonal relationships. Indeed, it is the therapeutic relationship itself – characterized by Binswanger as “being-together with one another [in] relatedness and love” – that first (re-)opens the patient to the possibility of love.³¹ Love is thus both the means through which anxiety is overcome, and the guiding light in the search for authenticity. If anxiety represents the “loss of world and self,”³² love transcends anxiety by grounding human existence in what Binswanger terms “being-beyond-the-world.”³³

In an introductory talk delivered to the World Psychiatry Congress in 1958, Binswanger reassured his audience that, “philosophy is not here in any way being introduced into

²⁸ *ibid.*, p. 206. Binswanger footnotes this line with a reference to §40 of Heidegger’s *Being and Time*.

²⁹ L. Binswanger, *Grundformen und Erkenntnis menschlichen Daseins* (Asanger Roland Verlag, 2004) p. 69.

³⁰ L. Binswanger, ‘The Case of Lola Voss’, trans. Ernest Angel, in Binswanger, *Being-in-the-World*, p. 337.

³¹ Binswanger, ‘Existential Analysis and Psychotherapy’, p. 82.

³² Binswanger, ‘Lola Voss’, p. 338.

³³ Binswanger, *Grundformen*, p. 134. My translation.

psychiatry or psychotherapy, but rather [...] the philosophical bases of these sciences are being laid bare.”³⁴ Whether or not this was an accurate characterization of existential analysis – and we may have reason to be skeptical – Binswanger’s synthesis of applied philosophy and psychiatry was always unstable. One reason for its instability was that it was so difficult to understand what its exponents were actually talking about. This may seem like a mundane and obvious point, but its implications are rarely considered. The very nature of an applied endeavour – be it philosophical, medical, scientific, etc. – suggests a practical application; the realm within which existential analysis primarily operated, in other words, was not theory, but praxis. Excessive esotericism must be seen as an obstacle to that end. One of the central challenges illustrated by the example of Binswanger is the difficulty of explaining concepts and ideas inherent to one discipline in such a way that they are comprehensible to non-specialists *without* oversimplifying or attenuating those ideas to such an extent that simplification itself becomes obfuscatory.

Binswanger was greatly vexed by translations, often advising correspondents to just learn German in order to read Husserl, Heidegger, *et al* in the original; he balked at terms such as *Daseinsanalyse* being rendered into other languages, and was incredibly exacting when it came to translations of his works, sending dozens of pages of corrections to those brave enough to undertake the task. It is tempting, however, to conclude that had he taken a less literal understanding of the term ‘translation’, existential analysis might have enjoyed a more favourable reception. For translation is not only about the accurate rendering of words from one language into another, but, more meaningfully, the expression of ideas from one discipline – one “language” – in a manner comprehensible to those who operate outside the linguistic norms of that discipline. It was Binswanger’s goal not only to establish authentic, “loving” relationships between individuals, but also between disciplines, to serve as a conduit between distinct but interrelated bodies of knowledge. One can, from a Binswangerian perspective, view the goal of this conference in similar terms. The lesson we take from Ludwig Binswanger is that in interdisciplinary endeavours as much as interpersonal ones, communication is key.

³⁴ Binswanger, ‘Existential Analysis and Psychotherapy’, p. 80.