



USING LOGOTHERAPY AS A COUNSELLING MODEL IN HELPING THE EXISTENTIALLY EMOTIONALLY DEPRESSED CHRISTIAN

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ABSTRACT: *Logotherapy is a term derived from logos, a Greek word that translates to 'meaning.' It is a therapy defined as treatment of a disorder, illness, or maladjustment. It was developed by Viktor Frankl and was founded on the belief that human nature is motivated by the search for a life purpose, the pursuit of that meaning for one's life. As a therapy of meaning it is very akin to religion. Frankl, the founder of logotherapy, was actually raised in a Jewish family and used his faith to cope with many hardships during life. His therapeutic technique led people to discover their meaning, the higher purpose in their lives.*

It focuses on the meaning of human existence as well as on man's search for such a meaning. Logotherapy is very suitable for pastoral care and counselling, for its method is similar to the belief in God or a higher power; it facilitates changes through deep spiritual, emotional and physical awareness. It is a therapeutic method that allows for the deepening of faith and beliefs that ultimately results in a strong commitment to God at the same time promotes sound ethical moral community society.

This paper does not intend to make logotherapy a panacea for all psychic problems but a suggestible counselling model for use by pastors and Christian educators: for helping the existentially frustrated and emotionally depressed, since all problems are logotherapeutically created. There is no doubt that most members are bedeviled with emotional depression which has effect on their commitments to God through the church. The calling of the Master, Jesus Christ, is for the pastor to equip the saints; so they may be about the ministry in the world.

KEYWORDS: Logotherapy, a Counselling Model, the Existentially Emotionally Depressed Christian



INTRODUCTION

A transporter once declared, “Oh how fitting, safe and stress-free it would be for people to use the right and correct vehicle when they are travelling.” He added that, “they will get to their destinations on time, with ease and also save their time and money, besides having good and healthy life.” Scott (1996) agreed with this idea when he observed that good and appropriate method of teaching and competent teacher will ensure for effective and efficient teaching learning.”

So often, pastors lament of their inability in getting results in spite of efforts made in counselling, preaching and teaching. Thus, it is pertinent to ask, can people achieve success in their pastoral ministry if they do not determine to use correct and appropriate methods and principles? Examine the various methods employed presently in equipping saints for ministry vis-à-vis challenges that members are confronted with. Could there be reasons for a more appropriate and effective method?

The typical church member in the twenty-first century is faced with complex emotional problems, emotional depression that may have root in the failure of government in living up to her roles of parents and children’s failure. Others could be as a result of natural disaster (flood, storm, lightening, death), spiritual problems (sickness generational curse) among others. A young man who decides to set up an oil pipeline on fire may be under an emotional depression. A young man or woman who decides to commit suicide must be acting under the influence of emotional depression. Such person(s) need a pastor’s help. Logotherapy as a therapy of meaning, which focuses on the meaning of human existence as well as on man’s search for a meaning, is an appropriate counseling model to helping such emotionally depressed people.

This paper entitled “Using Logotherapy as a Counselling Model in Helping the Emotionally Depressed Members,” covers an introduction to the paper, logotherapy as a concept and counselling model, techniques of methods of logotherapy, steps in logotherapeutic counselling method of emotionally depressed members, a conclusion, and then the reference.

Emotionally Depressed Members: There is need to clarify the phrases “emotionally depressed members” and of course other words used in connection with it. This is done to enable the readers gain a clearer understanding of the paper. Scheff (2011) explains emotion and depression to involve the numbing of emotions especially grief, fear, anger and shame. It occurs when these emotions loop back on themselves, having feelings, sometimes without limit. Feedback loops can produce emotions that are experienced as either unbearable, painful or out of control, or at least anticipated to be. However, there is a zone between emotion and depression that allows one to feel emotions and also to observe oneself feeling. This zone is possible because of the human capacity for role taking, seeking one’s self from the imagined point of view of another person.

Emotions could be so painful that they are either hidden, or so powerful as to be out of control. Normal emotions, like grief, shame, fear or anger, are unlikely to be extremely painful or powerful. They are merely bodily signals that abet people to loss, feeling inadequate, in danger or frustrated. They are also quite brief, usually a matter of seconds. For instance, a car barreling towards an individual on the freeway stimulates an instantaneous shock of fear, but it usually does not outlast the danger.



Schmit (2005) observed depression as a state of low mood and aversion of activity that can have a negative effect on a person's thoughts, behaviour, feelings, worldview and physical well-being. Salman (1997) said depressed people may feel sad, anxious, empty, hopeless, worried, worthless, guilty, irritable, hurt, or restless. They may lose interest in activities that once were pleasurable, experience loss of appetite or overeating, have problems concentrating, remembering details, or making decisions, and may contemplate or attempt suicide. Insomnia, excessive sleeping, fatigue, loss of energy or aches, pains or digestive problems that are resistant to treatment may also be present.

LOGOTHERAPY AS A CONCEPT AND COUNSELLING MODEL

Logotherapy is a therapy of meaning, or simply put, it is a therapy through meaning. Its focus is on the meaning of human existence as well as on man's search for such a meaning Hirsch (1995) and Amatea (1989) observed that if the meaning of a behaviour can be isolated and identified, chances are that new behaviour can be learned and applied in the future of such behaviour and the decisions preceding it are understood. Thus, identifying the meaning of behaviour will help people relate cause and effect in a clear and precise manner and after various opinions have been explored, help to make appropriate choices in the future. Clinebell (1989) explains logotherapy as a psychotherapeutic method which concentrates attention on the neurosis originating from the human spirit-neurogenic neurosis.

Wilson (1994) and Amatea (1989) and Frank (1976) observed that logotherapy is a term derived from *logos*, a Greek word that translates to 'meaning.' The second part of the word, therapy, refers to treating an illness, condition, or maladjustment. Hence, logotherapy is "the search for meaning in your life" Khatri (2023). A therapy defined as treatment of a disorder, illness, or maladjustment. They further stressed that it was developed by Viktor Frankl and was founded on the belief that human nature is motivated by the search for a life purpose, the pursuit of that meaning for one's life. Khatri (2023), added that Frankl developed the theory after his own experience in different Nazi concentration camps. He found that by finding meaning and purpose in life, humans can cope with hardships and suffering. In doing so, they can enjoy healthy aging and a long life. In modern-day, researchers believe that having a purpose in life can make you more resilient to face life's hardships. They say that when you move schools, jobs, or countries, it is all in search of purpose. When there isn't a revelation, you might become stressed and start questioning all the choices you've made. This affects your quality of life. Khatri (2023), added that there are three core principles that are at the heart of the Frankl philosophy. These, Khatri observed that:

1. Each person has a healthy core.
2. The primary focus is to enlighten a person and their own internal resources and provide them with the tool to use their inner core.
3. Life offers people, purpose and meaning; it does not owe or promise them a sense of fulfillment or happiness.

Logotherapy is based on the theory that all healing and wisdom is derived from people's noetic dimension and therein lays the cure for all of people's negative harmonies, relationships and emotions. It is from the noetic dimension that people must gather the information necessary to develop a resolution of spirit which can be used to facilitate necessary change in their life circumstances and inner conflict. By recognizing that people are spirit, that releases the fear



of death and the thought of others inflicting harm or usurping their physical health. Each person is seen as an authentic and unique being. Their lives, beliefs, and behaviours are all expressions of their uniqueness (Clinebel, 1989:159; Frankl, 1973:49; Hutzel and Finck, 1994:91).

Lukas (1986) and Fincham (1994) observed that logotherapy as a therapeutic tool, is useful in helping children and adults change behaviour and attitudes and thus gain control of their lives. That within the educational system, logotherapy is not only prudent but also practical. According to them, it is prudent because of ongoing budget problems, schools, families and institutions need to find ways of dealing with issues that overwhelm students and members alike and that interfere with learning and work conditions. Practical on the other hand, because logotherapy is action-oriented, allowing participants to assume responsibility for their own behaviour.

Hirsch (1990) and Frankl (1968) explain that due to financial crunch, school personnel cannot always depend on parents to seek outside help. They stressed that health care organizations and insurance companies restrict the number of visits for mental health services. That in addition to the current threats of job lay-offs, parents are reluctant to absent themselves from work. Consequently, it is difficult for parents to take time off from work to take children for therapy. Therefore, when mental health services can be provided at school, there is a greater likelihood that they will give permission for such services, allowing children to participate in therapy and or counselling session on a regular consistent basis.

Finchan (1994) pointed out that even though there is an awareness of on-going problems children face-at-home and in school, schools, private and public institutions face budget cuts that result in the elimination of programmes and reduction of staff. He further stressed that the emotional and social needs of students and school personnel remain. As a matter of fact, budget cuts add another level of problems because classes are bigger, teachers have less time for students, and students feel overwhelmed by the large number of classmates and school mates. Amatea (1989) added that middle and high schools have become so large that it is extremely difficult for adults and students to establish positive interpersonal relationships. This is as she stressed, deprives students of one more caring adult in their lives. Often there is no father, or if there is, he may only be a part-time father, living outside the home and having other interests. In many situations, the mother is both the sole care-taker and as a working mother, is often exhausted when she comes home from work, and frequently has little time when children need nurturing or an opportunity to express feelings and fears.

Teachers and counsellors at the same time, have such large case loads that consideration for the individual student is held to a minimum. School psychologists are assigned to school for the purpose of testing and they focus primarily on getting children into or of special education programmes. Consequently, they have little time for indepth counselling and therapy. What better place, Amatea emphasized, is there for a youngster to work through maladaptive behaviour or problems with peers and/or authority figures, than on the spot? The immediacy of focusing on a problem before it escalates, allows for change. By contrast, when a situation festers until the problem has been exacerbated, a severe crisis may develop (Amatea, 1987:77, 93).

Amatea (1989) and Fisch, Weakland and Segal (1986) provided a variety of ways whereby students and members alike who are in need could be offered short term problem-oriented



counselling which enables them and their families to effect change and then utilize personal strengths to resolve difficulties.

Logotherapy, as developed by Viktor Frankl, focuses on the here and now as well as what can be done in the future, rather than blaming past events on the client. The orientation is for clients to look at where they are, where they want to be, and what is necessary for the individual to reach that goal. The individual is encouraged to assume responsibility for personal actions and attitudes. Logotherapy is not a 'head trip' nor an intellectual exercise - logotherapy points out repeatedly that the individual is more than an intellectual being. The individual is a spiritual being, in search of meaning. Instincts, desires, and feelings are strong within each individual; the will to meaning is equally strong. Reasoning, planning, and assuming responsibility are of great importance in deciding what individuals do with their lives now and what kind of person(s) they will wish to become (Hirsh, 1990:74; Hutzell, 1994:79, 81).

Lukas (1992) points to situations of the chronically ill patient that can be found also in the chronically maladjusted student. That is, that "there is often a great discrepancy between what we intend to do and what we have done. This discrepancy reveals characteristics about us." The logotherapist or counsellor has to help students and members identify goals and seek their unique paths to reach their goals in personally meaningful ways. If members can be helped to see their uniqueness, working toward the *goal* can have meaning as well. Thus a student who wants to become an athlete can be helped to see that the many hours of academic study and athletic practice are parts of achieving the long-range goal and participation in these activities can be joyful and fulfilling in themselves. There is a meaningful path for each person, which only that person can fulfill in his or her own unique way. Lukas stressed that there is something intended for each person in the world; each person has a task waiting for him or her to perform.

Within the church setting, adults and children can be helped to look at options, make choices, define attitudes, and assume responsibility for decision reached at home, work place and in life generally. For with training, pastors and counselors can apply the tenets of logotherapy by seizing Socratic dialogue, deflection, and teaching members to make choices and assume responsibility for their actions and attitudes. Logotherapy in its broadest sense, is not a technique that is reserved only for therapists. Rather, when understood, logotherapy can be applied by each and every one in daily situations. Although a therapist or pastor can be the catalyst to help an individual find meaning, neither the therapist nor pastor can give meaning to an individual or a specific situation. Each person must discover meaning. Tools that can be helpful include the use of a logochart (Iwundu, 1987:60; Hirst, 1990:7). The logochart helps to focus on specific activities, provide freedom to prioritize and choose, and identify behaviours that can be incorporated or eliminated in order to enhance the individual's growth and development (Khatami, 1988:27; Lukas, 1992:11; Frankl, 1969:14).

What is ahead for logotherapy is education. Logotherapy as mentioned, is future-oriented. Schools provide less and less resources to help youngsters learn to cope with the issues that will confront them as they grow up in tomorrow's society. Logotherapy provides a form of short-term therapy that can be incorporated in the counselling programme and/or provided in the school psychologist or mental health worker assigned to the school. In such case, he is obligated to provide an environment that will not encumber a child's learning because of problems he experiences at home. Fincham (1994), touches on a single aspect (marital conflict)



of such an environmental impact. Marital conflict, according to Fincham, may have a lasting influence on a child's adjustment, depending on how children internalize and externalize problems. Longitudinal studies are proposed to study cause and effect of such conflict. While the child is in the midst of family upheaval, therapy for the child may be necessary. What better peace, than in the safe surroundings of the school? Same could be said, what better peace, than in the safe surroundings of the church. In many instances, the church may be the only site of stability for both the couple and children during family disruption. Trained logotherapists can help the couple and the child acknowledge that the domestic problems were not their fault. Using techniques of logotherapy, the couple and the child can be helped to identify short-term resolutions that will enable them to realize what can and what cannot be done (identify choices) and foster an awareness of what stands to take and what attitude to assume toward the family crisis.

According to Frankl (1973), the moment a man questions the meaning and value of his life, he is sick. Though sick, such a man is trying to prove that he is truly a human being. Moreover, rather than being merely what he called 'secondary rationalization' of instinctual drives, the striving to find out a meaning in life is a primary motivational force in him (man). In addition, Frankl says that man not only behaves according to what he is, he also becomes what he is according to how he behaves.

Frankl (1968) observed that man is not a thing among others. Things, Frankl stressed, determine each other but man is ultimately self-determining. And as such, what he becomes within the units of endowment and environment he has made himself, because he has the potentialities within himself which he actualizes with the power of decision irrespective of psycho-physical condition. Thus, as noted by Fabry (1975), psychologists have reversed their thinking: Freud considered a person sick if he was religious. Maslow considers him sick if he is unconcerned with religious questions. Frankl sees man reach out for answers in the broadest possible sense.

Lukas (1986), says Viktor Frankl was the first to diagnose and describe a man with a sense of despair, one suffering from despondency and pure destitution, emotional depression, and that in 1950, he (Frankl) named it 'existential frustration. According to Lukas (1986), Beeker (1964) and Iwundu (1987), existential frustration may manifest itself in boredom, indifference, feelings of meaninglessness, inner emptiness, a lack of goal orientation, apathy, despondence and dissatisfaction with life.

Many counselling and psychotherapeutic methods have been propounded in the recent past. Such methods include psycho-analytic therapy, music therapy, and other traditional therapies. It can be observed that there are also many other counselling and psychotherapeutic client-centred therapy, pastoral counselling, talk-therapy, logotherapy and so on (Hirsch, 1995:35; Clinebell, 1989:159).

Logotherapy teaches people to transcend their negative belief patterns that inhabit their internal growth. By releasing these chains that bind their mind and spirit, they are free to pursue their deepest desires and achieve a satisfaction of life and fulfillment of purpose. Logotherapy guides people to alternate their perceptions in order to view situations differently and to accept and embrace what is beyond their control. Through effective communication between the client and therapist, the meaning of being and life purpose are discussed, examined and explored.



This approach of therapy is viewed as a way of life, not exclusively as a treatment for challenging issues (Hutzell and Finck, 1994:100-102).

It is not the task of this paper to discuss the workable roles of all these counselling approaches, but to examine logotherapy and recommend it for use as a counselling model. The questions then to be pursued include, “How does logotherapy work?” What are the methods or techniques of logotherapy?

TECHNIQUES /METHODS OF LOGOTHERAPY

The following are techniques of logotherapy for a psychogenic type of neurosis-originated from the human psyche. Logotherapy as a therapeutic technique is normally applied to patients or clients who have some psychological problems, that is, psychogenic in nature (Fisch, Waekland and Segal, 1986:48; Clinebell, 1989:140; Iwundu, 1987:21).

Paradoxical Intention

This is applicable with phobic and obsessive compulsive individuals, members or patients. It utilizes what Frankl describes as the unique human quality of self-detachment, which he said enables man to step away from him/herself, look at him/herself from the outside, oppose himself, and even laugh at himself. As Frankl (1968) noted, man’s capacity of self-detachment manifests itself only in the defiant power of the ‘human spirit’ but also in his sense of honour. Paradoxical intention utilizes the facultative power of factors involved in the neurosis.

This method employs asking the client of the things he or she fears the most. Clients who suffer anxiety or phobias can be paralyzed by fear. But the use of humour and ridicule, they can wish for the thing(s) they fear the most, thus removing the fear from their intention and relieving the anxious symptoms associated with it (Leslie, 1965:11; Hirsch, 1995:18).

Dereflection

This is another method or technique of logotherapy. It is used when a client is overly self-absorbed on an issue or attainment of a goal. By redirecting the attention, or dereflecting the attention away from self, the client can fully become whole by thinking about others rather than himself (Iwundu, 1987:33; Becker, 1964:24). In the expressions of Frankl (1969), Iwundu (1987) and Lukas (1986), dereflection is used to neutralize the compulsive self-observation, or hyper-reflection, which they described to be common additional factor in neurotic reaction involving functional disturbances. They stressed that in helping such a client, he or she should be asked to shift his/her attention from himself to the task at hand.

Frankl (1967) added another by explaining it from a different term to dereflection which he calls “a man’s capacity of self-transcendence.” He emphasized that it is another human quality which enables man to forget about himself and reach out beyond himself towards other human beings and towards meaning. In this light, the client is asked not to concentrate effort and interest in the bid to derive pleasure by exploiting others to benefit himself or herself, but to do all he or she could to satisfy, please, or make others happy, thus gaining pleasure and satisfaction through others’ happiness and joy.



Socratic Dialogue

This is another technique or method in which the logotherapist uses by applying the client's own words or expression or phrases as a method of self-discovery (Clinebell, 1984:141; Fabry, 1975:28; Amatea, 199:7; Hirsch, 1995:9). Lukas (1986) pointed out that it involves a self-discovery discourse between the logotherapist and the client. The aim, stressed Lukas, is that of helping the client (patient) in self-exploration and self-clarification of his/her immediate situation, meaning and feelings. In other words, the logotherapist poses his/her questions in a way by which the patient will discover by himself a new attitude that he may find fitting to his situation. Here, the therapist quietly listens while the patient is allowed to unburden himself and to present his problems. This affords the patient to expound his/her theories about what Lukas calls "victimization by force beyond his control," the logotherapist on the other hand, is afforded the opportunity to take part in the discourse.

Appealing Technique

Lukas (1979), describes this method as that which takes the form of suggestion. Iwundu and Nwankwo (1995), added that suggestion or appeal must, of course, be used where the patient is too young, old or sick to achieve distance between himself and his symptoms, and where other appropriate methods have failed.

STEPS TO LOGOTHERAPEUTIC COUNSELLING METHODS

Lukas (1986, 1979) and Iwundu and Nwankwo (1995) suggested a series of steps that may be taken to help a patient/client with an existential, spiritual, or emotionally depressed problem.

Step I: Distance from Symptoms: Here the logotherapist is to help his/her patients realize that they are not identical with their symptoms. The patient is assured of the fact that all is not bad and is helped or awakened to see fear, obsession, depression, feelings, or inferiority, and emotional outburst as not an integral part of what he or she is but qualities he/she has and which he/she can modify and possibly overcome (Lukas, 1986:81).

Step II: Modification of Attitudes: The focus of the logotherapist is that of helping his/her patients gain new perspectives of him/herself and his/her life situation and thus modify his/her attitudes. The logotherapist here endeavours to educate the client by way of drawing out (from the literary sense of the Latin word *educare*) what is in the patient. He must of course do all in consideration with the patient's well-being and his truthfulness.

Step III: Socratic Dialogue: Lukas (1986), Iwunda and Nwankwo (1995), considered the Socratic dialogue as a step also in the helping process. Here the logotherapist pays keen attention as he listens quietly to the patient to unburden himself and learn to present his problems. While the therapist poses his questions in a way that enables the patient discover himself a new attitude while he might find fitting at his situation, he (the therapist) must not, warned Lukas, allow a client-centred therapy, that prevents or hides interruption.

Step IV: Reduction of Symptoms: The next step often takes care of itself, that is to say, the symptom disappears or at least becomes manageable after a successful modification of the patient's attitudes. In case of a tragic even or a natural disaster (death, unavoidable suffering, flood, guilt, to mention but a few), the patient comes to grips with his unalterable fate so he is



able to bear it. The logotherapist for instance, cannot restore an amputated leg, restore a child's parents or a youth's divorced parents or being born out of wedlock and the demands of being an orphan, without succumbing to apathy or despair, and without revolving against his/her fate in frustration (1992:90-91; 186:72).

Step V: Orientation towards Meaning: Here, the logotherapist does not focus on creating meanings; he merely elucidates them for the patients to see and make the part of their thoughts and actions. The logotherapist also draws his patient to new life contents that may strengthen and give him/her new incentives. Iwundu (1987), observed that "people who see only one value to fill life, be it work, family, or material possessions, are in danger of losing and succumbing to despair."

AN APPLICATION OF LOGOTHERAPY MODEL IN THERAPEUTIC SESSION

A woman who had been told several times about her husband's unfaithful attitude finally caught her husband on a fateful day with another woman. She was completely destabilized, perplexed, confused and initially expressed apathy and disbelief at what she saw. Finally she came to terms with the reality of the husband's behaviour and gripped by that emotional depression, expressed an emotion: wailing, throwing herself on the ground, weeping and refusing to be comforted. Finally, she left in that emotional condition of trauma to her pastor's office.

Logotherapeutic Session

Pastor: He rises from his sitting position to welcome the counsellee/client. He made every effort to calm the client down from that high emotional state to a soft one where she can speak – expressing herself.

Client: My husband is womanizing.

Pastor: Your husband is womanizing?

Client: Yes (she nods in affirmation).

Pastor: That means he is going after women?

Client: Yes (nods again) in affirmation.

Pastor: Pulls out a sheet of paper and pen and announces, Madam, please can you mention the names of these women?

Client: Yes, Ebiwari, Ebiwari, Ebiwari.

Pastor: (Interjecting): Madam, you have already mentioned Ebiware, in three places, are they the same person or different persons?

Client: The same person.

Pastor: Madam, you mean Ebiwari is the very woman your husband has been 'womanizing' with?



Client: Yes

Pastor: (Reaches out to the shelf, pulls out an English dictionary. He reads aloud the meaning of 'womanizing.' He handed it to the woman (client) to read also.

Client: (with hesitation) reads.

Pastor: Tries to help her explain the meaning.

Client: Cleans her tears and sits up properly. She then inquired, "It means that my husband is not 'womanizing' but is just unfaithful to me." Does that mean that I was wrong in my interpretation of the problem? Does it mean the problem is not as worse as I have painted it?

Pastor: You are right Madam; your husband's case is not a worse case as you reacted. You can still win him to yourself.

Are there things you think you can do to handle this situation?

Client: Yes, pastor.

Pastor: What are they and how confident are you about them?

Client: Explains (pastor interjecting to be sure of her confidence).

Pastor: Prays with her and requests for feed-back.

Other areas of application include:

1. Helping youths in the Niger Delta who often destroy oil pipelines. Most cases the reasons for their action are irrational. Most of them are under certain influences (cocaine, marijuana, among others).

2. Helping youths whose parents may have left, abandoned or rejected them to fend for themselves

In the Niger Delta area most parents abandon their children at the mercy of the public, grandparents, and so on. Most of these children had always cursed the parents and the day they were born.

3. Help churches and pastors who are irrational to the Cooperative Baptist Programme. Most often churches and pastors refused to remit their dues.

4. Help church members who often think irrationally – avoid church worship services, fight with their spouses.

5. Couples contemplating divorce. Most couples often regret their decisions for suing for divorce. Some if given appropriate occasion to question their decisions will have a change of mind and heart.



6. Students who have examination phobia. Students who have examination phobia can be helped overcome their fears using logotherapy.

CONCLUSION

Logotherapy as a therapy of meaning is very akin to religion. Frankl, the founder of logotherapy, was actually raised in a Jewish family and used his faith to cope with many hardships during life. His therapeutic technique led people to discover their meaning, the higher purpose in their lives.

Logotherapy though a counselling method, is very suitable for pastoral care and counselling, for its method is similar to the belief in God or a higher power; it facilitates changes through deep spiritual, emotional and physical awareness. It is a therapeutic method that allows for the deepening of faith and beliefs that ultimately results in a strong commitment to God at the same time promotes sound ethical moral community society.

This paper does not intend to make logotherapy a panacea for all psychic problems but a suggestible counselling model for use by pastors and Christian educators: for helping the existentially frustrated and emotionally depressed, since all problems are logotherapeutically created. There is no doubt that most members are bedeviled with emotional depression which has effect on their commitments to God through the church. The calling of the Master, Jesus Christ, is for the pastor to equip the saints; so they may be about the ministry in the world.

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