



The meaning of life and health – a comparative study of the concepts of Aaron Antonovsky and Viktor Frankl

Sens życia a zdrowie – studium porównawcze koncepcji Aarona Antonovsky’ego i Viktora Frankla¹

<https://doi.org/10.34766/fetr.v3i51.1110>

Kasper Sipowicz^a, Marlena Podlecka^b, Tadeusz Pietras^c

^a Kasper Sipowicz, PhD, <https://orcid.org/0000-0001-7384-2899>,

Department of Interdisciplinary Disability Studies, The Maria Grzegorzewska University in Warsaw

^b Marlena Podlecka, MA, <https://orcid.org/0000-0002-2213-374X>,

Department of Neuroses, Personality Disorders and Eating Disorders, Institute of Psychiatry and Neurology in Warsaw

^c Associate Professor Tadeusz Pietras, MD, PhD, <https://orcid.org/0000-0003-1771-3819>,

The Second Department of Psychiatry, Institute of Psychiatry and Neurology in Warsaw

Abstract: The presented paper analyses the interdependencies between the meaning of life and health. The noo-psychotheoretical concepts derived from the logotherapeutic trend of Victor Frankl (1984, 2009, 2018) and the phenomenon of health in salutogenetic orientation by Aaron Antonovsky (1979, 1992, 2005) have been compared. As a result, the importance of a sense of meaning in the process of achieving health and the essence of the sense of meaning as one of the elements of health have been outlined.

Keywords: logotherapy, noo-psychotheory, sense of coherence, sense of meaning, noetic dimension, health

Abstrakt: W niniejszym artykule przeanalizowano wzajemne zależności między sensem życia a zdrowiem. Porównano wywodzące się z nurtu logoterapeutycznego Viktora Frankla (1984, 2009, 2018) koncepcje noo-psychoteoretyczne oraz fenomen zdrowia w orientacji salutogenetycznej Aarona Antonovskiego (1979, 1992, 2005). W rezultacie nakreślone zostało znaczenie poczucia sensu w procesie osiągania zdrowia oraz istota poczucia sensu jako jednego z elementów zdrowia.

Słowa kluczowe: logoterapia, noo-psycho teoria, poczucie koherencji, poczucie sensu, wymiar noetyczny, zdrowie

Introduction

The ordeal of the Nazi concentration camps is a special thread connecting the revolutionary concepts of the Austrian psychiatrist and psychotherapist Viktor Frankl (2009) and the Israeli-American sociologist of medicine Aaron Antonovsky (1979). They found a phenomenon that was thoroughly human in inhuman suffering. They were fascinated by the strength with which a person in a borderline situation clings to life that is understood much more broadly than just avoiding death.

Frankl, as a prisoner of concentration camps, subjects life in the face of annihilation, absurdly deprived of all dignity, to a subtle and penetrating analysis (Schimmoeller, Rothhaar, 2021). By becoming a free man, although shattered by the baggage of experience, he becomes convinced that life never loses its meaning, and that suffering can become its deepest moral source. Antonovsky’s scientific interests were also centered around survivors of the Holocaust (Cierpikowska, Sęk, 2019). The researcher was particularly concerned about the question of why people

¹ Artykuł w języku polskim: <https://www.stowarzyszeniefidesetratio.pl/fer/2022-3-Sipowi.pdf>

maintain, or regain quickly, both somatic and mental health, despite the burden of tragic life circumstances. The essence of the theoretical considerations of both scientists is the fascination with the extraordinary predisposition of humans, which is conceptualized at various levels as well-being, health or happiness, as well as the potential to achieve them despite the most unfavorable circumstances.

1. Noo-psychotheory and the meaning of life

Noo-psychotheory is a contemporary trend in existentially oriented psychology and psychotherapy (Popielski, 2018). It is a kind of structuring and continuation of Frankl's (2009) concept of man, philosophy of life and psychotherapy based on the search for meaning – logotherapy.

One of the pillars of Frankl's thought is the question of free will, which opposes the deterministic conception of man (Frankl, 2018). It defines a specific type of personal freedom that does not exempt from general conditions and does not distance oneself from responsibility. It is implemented through self-experience and personal self-qualification of existence (Popielski, 2008). It expresses freedom to interpret phenomenologically one's own existence and to adopt an attitude towards fate. Another aspect of the concept of free will is directly related to personal responsibility for who a person becomes. The ideas developed on the basis of psychology and psychiatry, regardless of the adopted paradigm, describe the concepts of a human being in terms of soma – psyche, as a reactive system with specific properties and a way of functioning determined by adaptation to external factors, implementing certain innate potentialities (Zamiara, 1992; Pietras, Witusik, Mokros, Sipowicz, 2019). Frankl opens a closed circle of biological and environmental conditions, expanding the vision of human existence to the noetic (spiritual) area, which is filled with freedom to implement values. "Man is sometimes driven by his drives, but attracted by meaning" (Frankl, 2018, p. 62), and thus the decision as to whether he wants to fulfill this meaning remains within the scope of his freedom.

Using the philosophical anthropology of Max Scheler, Frankl found theoretical and empirical arguments for considering the phenomenon of spirituality as a being separate from the body and psyche (Lehman, Klempe, 2015). The bio-psychological dimension of human functioning is the basis of existence, but its formation is subjectively incomplete, being in some way closed by biological and environmental determinism. The soma and psyche are the starting point in the process of "becoming" a person, they are the area of expression, and not the essence, of existence, as the specific shape of personal existence is given through the "quality" of the noetic area (Popielski, 2018). The man achieves the noetic dimension through self-transcendence (Frankl, 1984) – going beyond the psychosomatic area of functioning towards self-reflection, making himself the object of observation and moral evaluation.

The logotherapeutic trend is recognized as the third Viennese school of psychotherapy (Russo-Netzer, Ameli, 2021). Frankl, constructing the theoretical foundations, stands on the shoulders of giants, Freudian psychoanalysis and Adlerian individual psychology, at the same time arguing firmly with the existing theories of needs and references. The pursuit of "superiority", conceptualized by Freud as the will of pleasure (Lear, 2015), and by Adler as the will of power (Oberst, Stewart, 2012), Frankl considered not as a metamotivation of human existence, but as derivatives of the will of meaning (Frankl, 2009). It is precisely the will of meaning that constitutes the man's fundamental and supreme aspiration, determining the direction and quality of his existence. According to Frankl (2018), the feeling of happiness or experiencing pleasure is a kind of a by-product of the realization of meaning, while the sense of personal strength and power, or achieving success has a value as long as it is a necessary means to find and fulfill meaning. Aaron J. Ungersma (1961, after: Frankl, 2018) illustrated perfectly the position of Frankl's will of meaning in relation to the Freudian will of pleasure and the Adlerian will of power. According to his aphorism, the level of maturity of a small child allows to be guided in life by the principle of pleasure, the adolescent youth will act according to the principle of power, while the motivation, or driving force, of a fully mature and formed person is the will of meaning.

For a deeper understanding of Frankl's considerations, one can refer to the author's personal experience, which turned out to be both a confirmation of the concept of logotherapy, developed by him already in the 30s of the twentieth century (Ameli, Dattilio, 2013), as well as an incentive for further explorations. As a prisoner of concentration camps during World War II, he noticed that people leading a life full of physical and mental torment are able to be happy in their own way, thus increasing their chances of survival (Frankl, 2009). The seemingly absurd reaction to the borderline situation is explained by the basic assumptions of logotherapy. Man immersed in the axiological universe perceives meaning even in the most tragic circumstances, finding the most difficult kind of fulfillment in the dignified enduring of his own fate.

The ailment of postmodern reality is the substitution of an authentic experience of an existence filled with meaning through the search for pleasure and the achievement of success in life. Meanwhile, Frankl's personal experience with the Holocaust shows clearly how fragile these points of reference are. Suffering, in fact, is a thoroughly human and essentially inevitable experience, and therefore a "seeker of eternal happiness", in the pursuit of pleasures and success, is unconditionally doomed to failure in the face of inevitable fate.

The meaning of life in psychological terms is understood as a subjective sense of purpose and experiencing values; understanding oneself and the world; self-esteem; a stock of life goals; self-regulation mechanism and coping with existential situations (Vos, Vitali, 2018). The operability of such a definite concept, however, does not fully encompass the logothetical concept of the meaning of life, located in the noetic (spiritual) area rather than the psychic one. Frankl (2018) understood meaning as an implied meaning² existing outside of the person at the transsubjective level. Meaning is therefore always discovered, it is impossible to invent – it exists in an objective way, but we experience it through subjective cognition, often making mistakes and wandering.

Meaning is always read at an intuitive level through a sensitive conscience and is a signpost in the post-modern world of axiological entropy. It does not show what man "must", what he is "allowed to", but what he "should" in his freedom and in the face of his own responsibility (Frankl, 1984).

Man fulfills the meaning of his existence through the implementation of values. There are three ways to do this: (1) through what he gives to the world himself; (2) through what he draws from the world and (3) through the attitude he takes toward fate (Frankl, 2018). The first two ways are naturally accessible to man – because a little talent and power is enough to shape the world and the senses to be able to live and experience. Attention should also be paid to their limitedness and exhaustibility. It is not difficult to suddenly find oneself in such a life situation, in which both action and experience will turn out to be significantly limited or impossible to fulfill (e.g. the experience of illness). The third way is associated with the ability to endure inevitable fate and suffering. When the man is unable to change his situation, he always has the opportunity to overcome it by implementing the values associated with his own attitude (Frankl, 1984). The logothetical thought carries a certain tragic optimism (Russo-Netzer, Ameli, 2021). Even if a person has already lost everything and is deprived of the possibility of realizing the meanings resulting from the value of creation and experience, he still has to fulfill the meaning invariably hidden in suffering (Frankl, 2018). From this perspective, it becomes clear that human life never loses its meaning.

The acquisition of the capacity to suffer is the supreme act of self-formation. The noetic qualities of freedom and responsibility (Popielski, 2008) place before man a constant need to decide—about something, about someone, but above all about himself. Each provision should be understood as its own decision, which shapes the decisive person. In the act of self-transcendence, man is able to rise above his own psychological and somatic conditions in order to choose the attitude he will take towards himself

2 However, always ad personam and ad situationem. Frankl (1984) assumes the existence of a supersense – an absolute sense, but he states that understanding it exceeds the human cognitive capabilities.

and towards the world. Thus, he has the freedom to shape his own character and take responsibility for who he becomes, thus realizing values and fulfilling meanings in the highest moral way.

2. The concept of a sense of coherence as a determinant of health in a salutogenetic approach

As a prisoner of concentration camps, Frankl (2009) noted that if only a person knows why it is worth living, he/she will be able to endure any suffering. The thoughts of Aaron Antonovsky (1979) followed a similar path, when in the 1970s he studied the adaptation to the climacteric among women of Jewish origin who survived the atrocities of extermination camps during World War II. The sociologist discovered with amazement that less than twenty years after the trauma of the Holocaust, as many as 29% of the women surveyed led a satisfying life, maintaining a relatively high level of somatic and mental health (Cierpiałkowska, Sęk, 2019; Espnes, Moksnes, Haugan, 2021).

Analysing the results of these studies, Antonovsky showed a certain perversity, thus setting out a new paradigm in thinking about health – the salutogenetic orientation. It is noteworthy that the researcher did not follow the obvious trail of the majority result obtained by 71% of women who could not cope with the deeply traumatic experience. In contrast, he became interested in a much smaller group of women who managed to shape their further life in a satisfactory way. Antonovsky observed with amazement: “To relive the unspeakable nightmare of the prison camp, to have the status of a displaced person for many years, and then to rearrange one’s life in a country affected by three wars... and get out of it without much harm to health!” (Antonovsky, 2005, p. 10). Asking the question about the factor that allows a person not only to survive, but, above all, to preserve the potential to achieve multidimensional well-being, led Antonovsky to develop a concept fundamental to the salutogenetic orientation, namely a sense of coherence.

The human body is in a dynamic state of heterostasis, being inherently exposed to contact with ubiquitous stressors, understood as psychosocial and physico-biological requirements, to which the body does not have at its disposal ready-made or automated adaptive reactions (Antonovsky, 1979). In the salutogenetic orientation, health is therefore understood as a continuous process of responding to stressors, which is tuning in to the requirements in a way that allows maintaining or restoring the optimal level of external and internal balance of the system. (Heszen, Sęk, 2007). Thus, health is perceived as a dynamic continuum of conditions on the health-disease axis, and not as a dichotomy in which categorization is based on the occurrence of pathological symptoms. It is the result of a transaction between stressors and the immune resources possessed, the modulator of which is a sense of coherence (Mittelmark, Bull, 2013).

In simplified terms, the sense of coherence can be described as an “attitude towards stressors” (Antonovsky, 1992), which can be characterized as “I can cope”. It has the character of an individual disposition to orientation and determines primarily the cognitive assessment of the situation and the available resources, although it also includes the emotional and motivational aspect. People with a strong sense of coherence are much less likely to perceive stimuli as stressors, while stressors are more likely to be assessed as non-threatening (Antonovsky, 2005).

The sense of coherence is defined as “a person’s global orientation, expressing the degree to which a person has a poignant, enduring, though dynamic sense of certainty that (1) the stimuli coming in during life from the internal and external environments are structured, predictable and explainable; (2) there are available resources to enable the subject to meet the demands of these incentives; (3) these requirements are seen as a challenge worth the effort and commitment” (Antonovsky, 2005, p. 34). The first component, the sense of intelligibility, refers to the degree to which a person perceives internal and external stimuli as meaningful, coherent and orderly information. The sense of resourcefulness reflects the extent to which a person perceives the possessed resources as adequate and sufficient to meet the demands associated with coping with these stressors. The sense of meaningfulness, as the third

component of the sense of coherence, is centered around the question: “is it worthwhile?”. It expresses the level of emotional involvement as well as the feeling that effort, commitment and dedication make sense when facing life’s difficulties (Antonovsky, 1979).

Many cross-sectional studies have demonstrated a positive correlation between the sense of coherence and health condition, as well as health-promoting behaviors (Pallant, Lae, 2002), with this correlation being much stronger for mental health (Eriksson, Lindstorm, 2006).

3. The meaning of life and health—in search of a common denominator

Looking at the concepts developed by Frankl and Antonovsky, it can be noticed that the fundamental thread connecting the theoretical considerations of both researchers is the question of what animates human existence, giving it a vital drive towards health and life despite unfavorable circumstances. Comparing the concepts of the will of meaning and the sense of coherence, which are basic for neo-psychotherapy, one can notice an analogy – the unpredictable fate or suffering that a person has to face can be identified with the requirements posed by stressors. The man is entangled in particular situations, the sum of which defines the landscape of an individual’s life, constantly confronting the world. The key issue is the question of the factor that enables the man to fulfill worthily the broadly understood existence.

The location of both concepts in different dimensions is the main difficulty in sorting out the interdependencies. Antonovsky (1979) places the construct of a sense of coherence (which is “the key to psychosomatic health”) on the plane of human mental functioning, encompassing cognitive as well as emotional and motivational processes. In our opinion, the construct of a sense of coherence is consistent with contemporary concepts of cognitive psychology and the concept of individual differences.

In contrast, Frankl (2009) states that beyond psychological mechanisms there is a noetic dimension and he sees in it an openness to experiencing

meaning as a metamotivation for human existence. Both constructs have a connotation similar to some extent, because they draw the man towards life and broadly understood vitality, but they are implemented at different levels. Unlike Antonovsky’s, Frankl’s concept is contained in the current of existential psychology and partly in considerations philosophical and theological in nature. From the point of view of the division of psychology into different subdisciplines, Antonovsky’s concept and Frankl’s concept are complementary to each other, and one is a closure, a supplement to the other. However, from the perspective of the philosophy of science, the combination of Frankl’s and Antonovsky’s concepts is transdisciplinary and even transversal, connecting the various subdisciplines of psychology, and psychology with philosophy. Attention should also be paid to the compatibility of both these concepts, complementary to each other, with Christian personalism. We believe that such an approach to both concepts is a new proposal to understanding these theories.

Many researchers embed meaning on the basis of psychological processes in the context of coping with stress (Park, Folkman, 1997). In this approach, human spirituality, and therefore the noetic dimension of personality and a sense of meaning (giving meaning), constitute the elements of the mechanism of coping with stressors (Heszen, 2019). By reducing the noetic dimension of the personality to the level of mental processes, it is therefore possible to perceive its properties in terms of immune resources that, through a sense of coherence, enable effective coping with stressors, directing a person towards health.

Stressors should be understood as any kind of “requirements for which there are no ready-made or automated adaptive reactions”, and these requirements can be both psychosocial and physico-biological in character (Antonovsky, 1979, p. 72). Health should therefore be understood as a continuous process of responding to stressors and tuning in to them in a way that guarantees maintaining or restoring the optimal level of organization (the so-called dynamic external and internal balance of the system) (Cierpikowska, Sęk, 2019). The concept of stressor has been burdened wrongly with pejorative connotations. Meanwhile, according to the definition presented

above, the stressor can be perceived as a challenge, not as a ready determinant of failure. A stimulus to which the body does not have a ready response may potentially be bivalent: either positive or negative (Cierpikowska, Sęk, 2019), which is conditioned by a subjective assessment. This evaluation process is determined by the immune resources that characterize the particular subject, which constitute the potential to reduce effectively the tension caused by the stressor. Confronting endo- and exogenous requirements with a range of individual-specific resources allows a subjective determination of the efficiency in terms of meeting them, and thus assessment of the individual stressors as positive, threatening or neutral.

The aforementioned generalized immune resources should be understood as any characteristic features of an individual, group or living environment that make it possible to reduce the state of tension effectively (Langeland, Wahl, et al., 2007). Among them, Antonovsky (1979) lists the resources related to values and attitudes, which can be understood from the perspective of noo-psychotheory as properties of the noetic dimension of human existence.

It should also be recalled that the sense of meaningfulness is a key pillar of the construct of the sense of coherence, and Antonovsky admits that he was inspired by Frankl's concepts. The sense of meaningfulness is paramount to the sense of coherence, because it has the power to activate or block human potential by modulating the intensity of other components. A high level of sense of meaningfulness can compensate for a lack of resourcefulness by generating an extremely strong motivation to look for the missing resources. In turn, a high level of a sense of intelligibility and resourcefulness turns out to be worthless, unless a man sees the point in committing himself to overcoming difficulties (Antonovsky, 2005).

In the salutogenetic orientation, health is operationalized in an extremely broad way as a sense of multidimensional well-being, or a subjective assessment of quality of life. This well-being is determined by a wide range of emotional, psychological and social factors, among which the meaning of life is also located (Keyes, 2014). A certain pool of empirical studies that confirm the relationship between a sense of meaning

in life and well-being should be mentioned (King, Hicks, Krull, DelGaiso, 2006; Mascaro, Rosen, 2005; Reker, 2005; Steger, Frazier, 2005; Steger, Frazier, Oishi, Kaler, 2006; Urry et al., 2004).

The phenomenon of the meaning of life located in the salutogenetic orientation is therefore considered as (1) one of the stocks of immune resources necessary to cope with stressors; (2) one of the three pillars of the sense of coherence (sense of meaningfulness); (3) one of the determinants of well-being, and thus health.

In order to outline the full picture of the convergence of both phenomena, one should also trace the opposite direction of dependence, namely the concept of health on the basis of noo-psychotheory. Looking at the above considerations, one could get the impression that the sense of the meaning of life is a construct that is somehow non-autonomous and subordinate to the concept of the sense of coherence as one of its elements. Such an interpretation would be an oversimplification, as the sense of the meaning of life is the central concept of noo-psychotheory, providing a coherent and holistic concept of understanding the human existence and, therefore, also of defining health.

According to Frankl's dimensional ontology (2018), the man is considered as a unity of the biological, mental and noetic dimensions. Thus, from this perspective, health is understood in a holistic way as "the fact of the proper somatic, mental and noetic functioning of the individual, which allows a person to fully, multidimensionally develop and mature, to be and to become" (Popielski, 2018, p. 216). The balance of functioning of these three areas is disturbed in the event of a violation of any of them. It means that the difficulties experienced in the noetic sphere can translate into somatic and/or mental disorders, and this relationship occurs multidirectionally between the three dimensions of existence (Gierus, Popielski, 2011).

To define the abnormalities in the noetic dimension of existence, Frankl (2009) coined the concept of noogenic neurosis, which can be understood in simple terms as the result of frustration of the will of meaning (existential void), and thus the reduction or disappearance of the sense of meaning of life. It should

be emphasized that noogenic neurosis may manifest itself similarly to nosological units formerly referred to as psychogenic neuroses (Aleksandrowicz, 1998), and therefore as somatic, experiencing and behavioral disorders. Empirical research indicates that a strong sense of the meaning of life promotes both mental and somatic health (Reker, 1994; Popielski, 2018), however, the lack of scientific exploration in this area should be emphasized.

According to Frankl (2009), the desire to discover meaning is the most basic and fundamental motivation of humans, and thus an expression of health. However, there are theories according to which the search for meaning should be seen as an expression of frustration of needs (Steger, Kashdan, Sullivan, Lorentz, 2008). Reker (2000), on the other hand, points out that both perspectives are justifiable, and that the search for meaning can be both positive for health (affirmation of life) and negative (a symptom of dysfunction).

Health in the sense of noo-psychotherapy is perceived as one of the values, and therefore a phenomenon that the man should implement, assuming responsibility for it. Loss of health is associated with suffering, towards which a person is able to adopt an

attitude, transcending the conditions associated with the disease. While recognizing the meaning of suffering will not cure somatic and mental disorders, it is of great importance both in the process of recovery and in accepting irreversible limitations, or a terminal state.

Conclusion

The relation between the meaning of life and health is described both in the model of coping with stress in salutogenetic orientation and on the basis of noo-psychotherapy. However, both Frankl's (1984, 2009, 2018) and Antonovsky's (1979, 1992, 2005) concepts are derived from reflection on the deep sense of the meaning of life, which is a phenomenon that directs the man towards health and towards life. The analysis of both theories indicates that Antonovsky's concept of the sense of coherence is based on the concept of Viktor Frankl, as written by Antonovsky himself. The similarity of these concepts can also be explained by psychobiographical aspects, because both Antonovsky and Frankl were Holocaust victims who experienced the ordeal of a concentration camp.

Bibliography

- Aleksandrowicz, J. (1998). *Zaburzenia nerwicowe*, Warszawa: Wydawnictwo Lekarskie PZWL.
- Ameli, M., Dattilio, F.M. (2013). Enhancing Cognitive Behavior Therapy With Logotherapy: Techniques for Clinical Practice, *Psychotherapy*, 50(3), 387-391.
- Antonovsky, A. (1979). *Health, Stress and Coping*, San Francisco: Jossey Bass.
- Antonovsky, A. (1992). Can attitudes contribute to health? *Advances. The Journal of Mind-Body Health*, 8(4), 33-49.
- Antonovsky, A. (2005). *Rozwikłanie tajemnicy zdrowia. Jak radzić sobie ze stresem i nie zachorować*, Warszawa: Instytut Psychiatrii i Neurologii.
- Cierpiątkowska, L., Sęk, H. (2019). Teoretyczne i metodologiczne podstawy psychologii klinicznej, (w:) L. Cierpiątkowska, H. Sęk (red.), *Psychologia kliniczna*, 35-48, Warszawa: Wydawnictwo Naukowe PWN.
- Eriksson, M., Lindstrom, B. (2006). Antonovsky's sense of coherence scale and the relation with health: a systematic review, *Journal of Epidemiology and Community Health*, 60(5), 376-81.
- Espnes, G.A., Moksnes, U.K., Haugan, G. (2021). Overarching Concept of Salutogenesis in the Context of Health Care, (in:) G. Haugan, M. Eriksson (eds.), *Health Promotion in Health Care-Vital Theories and Research*, 15-22, Springer.
- Frankl, V. (1984). *Homo patiens*, Warszawa: Instytut Wydawniczy PAX.
- Frankl, V. (2009). *Człowiek w poszukiwaniu sensu*, Warszawa: Wydawnictwo Czarna Owca.
- Frankl, V. (2018). *Wola sensu. Założenia i zastosowanie logoterapii*, Warszawa: Wydawnictwo Czarna Owca.
- Gierus, J., Popielski, K. (2011). *Astma oskrzelowa. Perspektywa psychologiczno-egzystencjalna*. Warszawa: Diffin.
- Heszen, I., Sęk, H. (2007). *Psychologia zdrowia*, Warszawa: Wydawnictwo Naukowe PWN.
- Heszen, I. (2019). Kliniczna psychologia zdrowia, (w:) L. Cierpiątkowska, H. Sęk (red.), *Psychologia kliniczna*, 517-540, Warszawa: Wydawnictwo PWN.
- Keyes, C.L.M. (2014). Mental Health as a Complete State: How the Salutogenic Perspective Completes the Picture, (w:) G.F. Bauer, O. Hamming (red.), *Bridging Occupational, Organizational and Public Health: A Transdisciplinary Approach*, 179-192, Dordrecht: Springer.
- King, L.A., Hicks, J.A., Krull, J.L., Del Gaiso, A.K. (2006). Positive affect and the experience of meaning in life, *Journal of Personality and Social Psychology*, 90, 179-196.
- Lehman, O.V., Klempe, S.H. (2015). Psychology and the Notion of the Spirit: Implications of Max Scheler's Anthropological Philosophy in Theory of Psychology, *Integrative Psychological and Behavioral Science*, 49, 478-484.
- Lear, J. (2015). *Freud*, New York: Routledge.
- Mascaro, N., Rosen, D.H. (2005). Existential meaning's role in the enhancement of hope and prevention of depressive symptoms, *Journal of Personality*, 73, 985-1013.

- Mittlemark, M.B., Bul, T. (2013). The salutogenetic model of health in health promotion research, *Global Health Promotion*, 20(2), 30-38.
- Oberst, U.E., Stewart, A.E. (2012). *Adlerian Psychotherapy. An Advanced Approach to Individual Psychology*, London-New York: Routledge.
- Pallant, J.F., Lae, L. (2002). Sense of coherence, well-being, coping and personality factors: further evaluation of the sense of coherence scale, *Personality and Individual Differences*, 33(1), 39-48.
- Park, C., Folkman, S. (1997). Meaning in the context of stress and coping, *Review of General Psychology*, 1, 115-44.
- Pietras, T., Witusik, A., Mokros, Ł., Sipowicz, K. (2019). The paradigms of contemporary psychiatry, *Polski Merkuriusz Lekarski*, XLVI (272), 94-97.
- Popielski, K. (2008). Noetyczne jakości Życia i ich znaczenie w procesie "bycia i stawania się" egzystencji, *Chowanna*, 1, 9-25.
- Popielski, K. (2010). Zdrowie i choroba w kontekście bycia, rozwoju i stawania się egzystencji podmiotowo-osobowej, (w:) K. Popielski, M. Skrzypek, E. Albińska (red.), *Zdrowie i choroba w kontekście psychospołecznym*, 37-43, Lublin: Wydawnictwo KUL.
- Popielski, K. (2018). *Noetyczny wymiar osobowości. Psychologiczna analiza poczucia sensu życia*, Lublin: Institute of Biofeedback and Noo-psycho-somatic.
- Reker, G.T. (1994). Logotherapy and logotherapy: challenges, opportunities, and some empirical findings, *The International Forum for Logotherapy*, 14, 47-55.
- Reker, G.T. (2000). Theoretical perspective, dimensions, and measurement of existential meaning, (in:) G.T. Reker, K. Chamberlain (eds.), *Exploring existential meaning: Optimizing human development across the life span*, 39-58, Thousand Oaks, CA: Sage Publications.
- Reker, G.T. (2005). Meaning in life of young, middle-aged, and older adults: Factorial validity, age, and gender invariance of the Personal Meaning Index (PMI), *Personality and Individual Differences*, 38, 71-85.
- Russo-Netzer, P., Ameli, M. (2021). Optimal Sense-Making and Resilience in Times of Pandemic: Integrating Rationality and Meaning in Psychotherapy, *Frontiers in psychology*, 12, 645926.
- Schimmoller, E.M., Rothhaar, T.W. (2021). Searching for Meaning with Victor Frankl and Walker Percy, *The Linacre Quarterly*, 88(1), 94-104.
- Suchocka, L. (2011). *Poczucie odpowiedzialności w zdrowiu i w chorobie. Perspektywa noo-teoretyczna*, Warszawa: Wydawnictwo Difin.
- Steger, M.F., Frazier, P. (2005). Meaning in life: One link in the chain from religion to well-being, *Journal of Counseling Psychology*, 52, 574-582.
- Steger, M.F., Frazier, P., Oishi, S., Kaler, M. (2006). The Meaning in Life Questionnaire: Assessing the presence of and search for meaning in life, *Journal of Counseling Psychology*, 53, 80-93.
- Steger, M.F., Kashdan, T.B., Sullivan, B.A., Lorentz, D. (2008). Understanding the Search for Meaning in Life: Personality, Cognitive Style, and the Dynamic Between Seeking and Experiencing Meaning, *Journal of Personality*, 76(2), 199-228.
- Zamiara, K. (1992). Epistemologiczne założenia psychologicznej wizji człowieka, (w:) E. Aranowska (red.), *Wybrane problemy metodologii badań*, 12-32, Warszawa: Wydawnictwo Uniwersytetu Warszawskiego.
- Urry, H.L., Nitschke, J.B., Dolski, I., Jackson, D.C., Dalton, K.M., Mueller, C.J., Rosenkranz, M.A., Ryff, C.D., Singer, B.H., Davidson, R.J. (2004). Making a life worth living, *Psychological Science*, 15, 367-373.
- Vos, J., Vitali, D. (2018). The effects of psychological meaning-centered therapies on quality of life and psychological stress: A metaanalysis, *Palliative and Supportive Care*, 16(5), 1-25.