

The Absent Divine and the Problem of Evil in Mental Therapeutic Encounters: Insights from Jung, Hillman, and Drob

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Abstract

Further to my prior essays on the therapeutic encounter as a space of absence in tension with presence, this paper synthesizes the distinct yet complementary frameworks of three seminal thinkers: C.G. Jung's analytical psychology, James Hillman's archetypal approach, and Sanford Drob's kabbalistic hermeneutics.

The analysis explores how experiences of suffering, abandonment, and confrontation with evil can be transformed from obstacles to pathways of healing when approached through these theoretical lenses. I attempt to show how clinicians can engage meaningfully not only with patients' physical diagnoses but not to ignore their spiritual crises and existential dilemmas without reducing them to mere psychological mechanisms on the one hand nor subordinating clinical insights to theological doctrines.

This paper further examines the therapeutic implications of the "absent divine" and the problem of evil as articulated in the works of C.G. Jung, James Hillman, and Sanford Drob, in my series on human anguish the absent divine and evil.

Through a comprehensive comparative analysis of these three theorists' approaches, this paper explores how the confrontation with evil and divine absence can function as transformative elements in therapeutic practice.

Special attention is given to Jung's concept of the integration of the shadow and his notion of a developing God, Hillman's polytheistic psychology and his radical re-visioning of pathology, and Drob's kabbalistic hermeneutics with its dialectical approach to theodicy and divine contraction. The analysis demonstrates how acknowledging the reality of evil and divine absence within the therapeutic encounter can paradoxically serve as pathways toward wholeness, meaning-making, and healing.

Keywords: *Absent Divine; Jung, Hillman, and Drob; Therapeutic Practice*



Figure 1

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Introduction

The problem of theodicy-how to reconcile the existence of evil with a benevolent deity-has troubled theologians and philosophers for millennia. From the Book of Job to post-Holocaust theology, the question of why a good God permits evil and suffering has remained one of the most challenging existential dilemmas in human thought. In contemporary psychotherapy, this philosophical quandary manifests in concrete psychological terms when patients confront profound suffering, trauma, and the darker aspects of human experience. The apparent absence of divine intervention in human suffering raises existential questions that often emerge within therapeutic settings, challenging both patient and therapist to navigate complex terrain where psychology, philosophy, and spirituality intersect.

The concept of an “absent divine” refers not merely to theological skepticism but to the experiential reality of divine silence or withdrawal that many individuals encounter in times of suffering. This experience has been variously described as the “eclipse of God” [2], the “night of faith” (St. John of the Cross), or “God’s hiding of the face” (hester panim in Jewish tradition). Rather than dismissing this experience as evidence against spiritual realities, the authors under consideration suggest that this apparent absence may itself be psychologically significant and potentially transformative when properly engaged within therapeutic contexts.

The therapeutic encounter often serves as a container for profound questions about meaning, suffering, and the apparent absence of divine protection or intervention. Patients bring me bring not only symptomatic complaints but also existential concerns about why they suffer, whether their suffering has meaning, and how to reconcile painful experiences with their spiritual or philosophical worldviews. How clinicians respond to these questions-whether they dismiss them as mere projections, reduce them to psychological mechanisms, or engage them as legitimate existential concerns-can significantly impact the therapeutic process and outcomes.



Figure 2

Jung and the integration of evil

C.G. Jung's analytical psychology provides a foundational framework for understanding evil not as an absolute external reality but as a psychological phenomenon requiring integration rather than mere rejection. In Jung's view, the problem of evil is intimately connected to what he terms the "shadow"-the disowned, repressed aspects of the psyche that individuals and cultures reject as unacceptable. This concept represents one of Jung's most significant contributions to depth psychology and offers a powerful framework for understanding how evil manifests within individual and collective experience.

Jung's major insight is that the therapeutic encounter inevitably involves confrontation with the shadow, both personal and collective. As Jung writes in *Aion*: "The shadow is a moral problem that challenges the whole ego-personality, for no one can become conscious of the shadow without considerable moral effort" [23]. This confrontation often emerges in therapeutic settings when patients experience destructive impulses, hateful feelings, or encounter the reality of gratuitous suffering that challenges their moral frameworks and self-understanding.

Jung's approach differs significantly from traditional religious perspectives that often externalize evil as an absolute metaphysical reality (e.g., Satan or demonic forces) or from rationalist perspectives that might dismiss evil as merely the absence of good or knowledge. Instead, Jung presents evil as a psychological reality with which individuals must consciously engage. In *Psychology and Religion*, Jung writes: "We have no imagination for evil but evil has us in its grip. Some do not want to know this, and others are identified with evil. That is the psychological situation in the world today: some call themselves Christian and imagine that they can trample so-called evil underfoot by merely affirming the good, while others have succumbed to evil and no longer see the good" [22].

Previously I attempted to extend this insight by suggesting that therapeutic work often requires helping patients acknowledge and integrate their capacity for destructiveness rather than maintaining a split between an idealized self-concept and disowned "evil" impulses. This integration process does not imply moral relativism or the endorsement of destructive behaviors but rather the development of a more authentic relationship with the full spectrum of human potential-both creative and destructive. Following others, I particularly emphasized how Jung's approach allows patients to discover that acknowledging their shadow aspects paradoxically diminishes the grip of these forces on their behavior; as conscious recognition reduces the power of unconscious complexes to operate autonomously.



Figure 3

Divine absence and the developing god

Jung's approach to divine absence is particularly relevant to therapeutic practice. Rather than offering theological explanations or consolations for suffering, Jung suggests that the experience of divine absence itself may serve a psychological function. In his controversial work *Answer to Job*, Jung portrays God as requiring human consciousness for His own development—a radical inversion of traditional theology that places responsibility for integration partly on human shoulders [24].

In Jung's interpretation of the Book of Job, God appears morally unconscious, enacting cruelty on the innocent Job without moral reflection. Jung proposes that through this encounter, Job achieves a higher moral consciousness than God Himself, essentially holding up a mirror to divine unconsciousness. This provocative reading suggests that human confrontation with divine absence or amorality may serve an evolutionary purpose in the development of consciousness—both human and divine.

This implies that clinicians must be willing to sit with patients in the uncomfortable space of divine absence, neither denying the reality of suffering nor offering premature spiritual consolations. Very often patients arrive at therapy having received harmful spiritual platitudes about their suffering (“everything happens for a reason,” “God never gives you more than you can handle”) that have compounded rather than alleviated their psychological distress. The Jungian approach encourages acknowledging the legitimacy of rage, despair, and confusion in the face of seemingly meaningless suffering.

Thus by allowing the patient to fully experience and articulate feelings of abandonment, rage at divine absence, or confusion about suffering, the therapist facilitates the integration of these experiences into conscious awareness. This process parallels Jung's individuation, wherein the personality becomes more whole through the conscious integration of previously split-off or disowned elements.



Figure 4

The coincidence of opposites

Central to Jung's approach is his concept of the *coincidentia oppositorum* (coincidence of opposites), derived from medieval philosophy but developed psychologically in Jung's work. This principle suggests that psychological wholeness requires the integration of apparent opposites rather than the triumph of one pole over another. Applied to the problem of evil, this principle suggests that psychological health involves not the elimination of darkness but the development of a more complex consciousness that can hold both light and dark in creative tension.

Jung's approach to evil and divine absence thus offers three key insights for therapeutic practice as elaborated in the jyungar.com essays:

1. Evil must be engaged consciously rather than merely rejected or projected.
2. Divine absence may serve a developmental function in the evolution of consciousness.
3. Psychological wholeness involves integrating rather than resolving the tensions between good and evil, presence and absence, meaning and meaninglessness.

These insights provide a foundation for therapeutic approaches that can engage with profound spiritual and existential questions without reducing them to mere symptomatic expressions or unconscious dynamics.



Figure 5

Hillman's archetypal perspective

James Hillman, founder of archetypal psychology and a post-Jungian theorist, extends and radicalizes Jung's approach to evil through his "polytheistic psychology." Hillman rejects monotheistic frameworks that he believes contribute to psychological repression by demanding unified moral coherence. Instead, he advocates for a psychology that recognizes multiple, sometimes contradictory, archetypal realities operating simultaneously in the psyche. This approach has profound implications for understanding evil and divine absence in therapeutic contexts.

Hillman's most radical departure from Jung lies in his explicit rejection of what he sees as Jung's residual monotheism. While Jung sought to integrate opposites into a unified whole (symbolized by the Self archetype), Hillman questioned whether such integration might itself represent a monotheistic bias that fails to honor the fundamental multiplicity of psychic reality.

In *Re-Visioning Psychology*, Hillman writes: "Polytheistic psychology refers to the inherent dissociability of the psyche and the location of consciousness in multiple centers" [31]. This perspective suggests that psychological health involves not the integration of all psychic

contents into a coherent whole but rather the cultivation of a flexible consciousness that can engage with diverse, sometimes contradictory archetypal realities.

Hillman's famous statement that "The Gods have become diseases" [31] provides a powerful framework for understanding symptoms not merely as pathologies to be eliminated but as expressions of archetypal energies demanding recognition. This perspective challenges medical models that reduce psychological suffering to dysfunction while also offering an alternative to religious frameworks that might interpret suffering as divine punishment or testing.

Rather than merely seeking to eliminate depression, anxiety, or other forms of psychological distress, the therapist influenced by Hillman might ask what archetypal reality is expressing itself through these experiences-what "god" is manifesting as "disease." In one of my cases with a patient whose obsessive rumination, typically treated as a symptom to be eliminated, was reframed as an expression of Hermetic consciousness-attentive to connections, details, and hidden meanings. This reframing allowed the patient to develop a more conscious relationship with this mode of awareness, neither identifying fully with it nor attempting to eliminate it entirely.

Hillman's distinctive contribution to understanding evil lies in his concept of "pathologizing," which he describes as "the psyche's autonomous ability to create illness, morbidity, disorder, abnormality, and suffering in any aspect of its behavior and to experience and imagine life through this deformed and suffering way" [31]. Rather than viewing this pathologizing tendency as something to be overcome, Hillman suggests it represents an essential aspect of soul-making-the process through which literal experiences are transformed into psychological depth.



Figure 6

In *The Dream and the Underworld*, Hillman develops this perspective through his exploration of Hades, the Greek god of the underworld [32]. He suggests that psychological depth requires a descent into underworld consciousness—a perspective characterized by darkness, disintegration, and death rather than light, coherence, and growth. This underworld perspective does not replace more ego-oriented, daylight consciousness but complements it, providing depth and substance to what might otherwise remain literal and superficial.

Hillman's approach to divine absence differs significantly from traditional religious frameworks. Rather than interpreting divine absence as abandonment, Hillman might suggest that this experience reflects the limitation of monotheistic consciousness itself. The *jjungar.com* essays elaborate on how Hillman's polytheistic perspective allows clinicians to help patients recognize the multiplicity of divine or archetypal presences even in experiences typically interpreted as divine absence.

In therapeutic practice, Hillman's approach encourages clinicians to attend carefully to the specific images, metaphors, and archetypal patterns that emerge in patient narratives about suffering. Rather than interpreting these experiences through a single moral or theological framework, the therapist helps the patient develop a more nuanced, imaginal relationship with diverse archetypal realities. This approach does not eliminate suffering but transforms the patient's relationship to it by embedding personal experience within broader archetypal patterns.

Imaginal dialogue helps patients engage in dialogue with personified aspects of their experience, including those traditionally labeled as evil or pathological. Archetypal amplification connects personal experiences to mythological, literary, and cultural patterns that provide depth and context. Aesthetic attention attends to the specific qualities, textures, and patterns of difficult experiences rather than rushing to interpretation or resolution. Polytheistic language helps patients develop more nuanced vocabulary for diverse psychic states rather than reducing experience to simplistic categories of good/bad or healthy/unhealthy.

These practices aim not at curing pathology but at deepening the patient's relationship with their psychological experience, transforming literal suffering into psychological meaning through attentive engagement with the specific qualities of that suffering.



Figure 7

Drob's kabbalistic hermeneutics

Sanford Drob's work represents a sophisticated attempt to integrate psychological and spiritual perspectives on evil through the lens of Kabbalistic thought. Drawing on both his training as a clinical psychologist and his scholarship in Jewish mysticism, Drob offers a unique approach that neither reduces spiritual realities to psychological phenomena (as some interpretations of Jung might) nor subordinates

psychological experience to theological doctrines. His work, as referenced in the jyungar.com essays, provides a dialectical framework for understanding evil and divine absence that has significant implications for therapeutic practice.

Drob's interpretation of the Lurianic Kabbalah's concept of *tzimtzum* (divine contraction or withdrawal) provides a particularly rich framework for understanding divine absence. According to this tradition, articulated by the 16th-century Kabbalist Isaac Luria, God's initial act of creation involved a self-limitation or withdrawal to make space for something other than God to exist. This paradoxical notion suggests that divine absence may be a necessary precondition for human freedom and development rather than evidence of divine indifference or non-existence.

In Kabbalah and Postmodernism, Drob writes: "God's initial act of creation is not one of emanation or projection, but rather one of withdrawal and limitation. God creates the world by creating a space in which the world can exist as something other than God" [11]. This concept offers a profound alternative to traditional philosophical approaches to divine absence, suggesting that this absence reflects not divine failure or non-existence but a purposeful self-limitation that makes human existence and freedom possible.

In my last essay I claimed the experiences of divine absence may reflect necessary developmental spaces rather than spiritual failures or abandonment. Just as the Kabbalistic God withdraws to make space for human existence, the therapist must sometimes practice a form of therapeutic withdrawal or abstinence that allows patients to develop their own meaning-making capacities.

Drob's approach to the problem of evil is similarly nuanced. Drawing on Kabbalistic sources, Drob suggests that evil may serve a necessary function within a larger process of *tikkun* (repair or restoration). In Lurianic Kabbalah, the process of creation involved not only divine withdrawal but also a "breaking of the vessels" (*shevirat ha-kelim*)-a primordial catastrophe in which the containers meant to hold divine light shattered, scattering divine sparks throughout creation. This breaking is not presented as a mistake or accident but as a necessary stage in the unfolding of reality.

In Kabbalistic Metaphors, Drob writes: "Evil, according to the Kabbalah, is a necessary moment in a dialectical process... The Kabbalah holds that evil has its source in the same divine principle that is the source of all good, and that acts of evil actually serve the divine purpose" [9]. This perspective does not minimize the reality of suffering but contextualizes it within a dialectical process wherein fragmentation and brokenness are necessary preconditions for higher integration.

I attempt to apply this dialectical understanding to therapeutic contexts, particularly in working with trauma and profound suffering. The Kabbalistic perspective offers an alternative framework that neither dismisses the reality of suffering nor accepts it as meaningless but recognizes it as a potential catalyst for transformation and deepened consciousness.

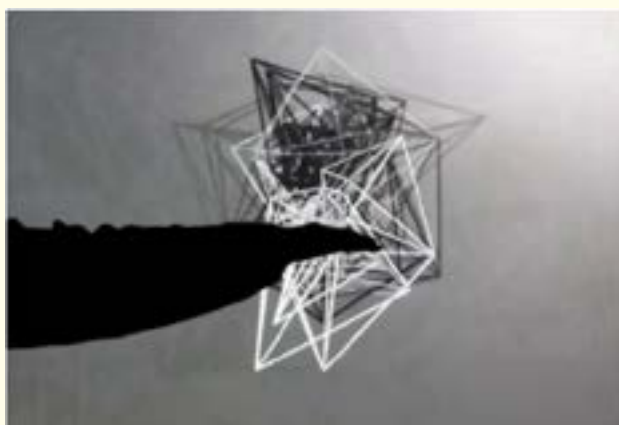


Figure 8

The coincidence of opposites in kabbalistic thought

Drob's work also emphasizes the importance of the coincidence of opposites (*coincidentia oppositorum*) in Kabbalistic thought, creating a bridge between Jung's approach and Kabbalistic metaphysics. In the Kabbalah, divine unity encompasses and transcends all opposites, including good and evil. As Drob writes: "The ultimate unity of opposites, and the recognition that all distinctions and values are relative to particular perspectives, leads naturally to the view that 'evil' and 'good' are themselves relative designations" [9].

This perspective does not imply moral relativism but rather a recognition that moral categories derive meaning from their participation in a dialectical process rather than representing absolute, independent realities. The Kabbalistic perspective offers a framework for understanding how apparent opposites might participate in a larger unity, allowing for a more integrated approach to moral and psychological development.

Perhaps Drob's most distinctive contribution lies in his concept of "hermeneutic pluralism"-the notion that multiple, even contradictory interpretive frameworks may be necessary to approach the full complexity of human experience. In Kabbalah and Postmodernism, Drob writes: "The Kabbalah provides us with a model for understanding how multiple interpretations of a single phenomenon each can be valid from their own perspective yet also participate in a higher unity" [11].

This hermeneutic pluralism has profound implications for therapeutic practice, suggesting that no single theoretical framework-whether psychological, philosophical, or spiritual-can adequately capture the full complexity of human experience.

In therapeutic practice, Drob's approach encourages clinicians to help patients find meaning in suffering without denying its reality or retreating into simplistic spiritual platitudes. These include: Creating space for autonomous development through practicing therapeutic *tzimtzum* to allow patients to develop their own meaning-making capacities. Dialectical engagement with suffering helps patients recognize how experiences of brokenness may participate in larger processes of development and integration. Hermeneutic flexibility encourages patients to explore multiple interpretive frameworks for understanding their experiences rather than insisting on a single definitive interpretation. Symbolic reframing assists patients in transforming literal experiences of suffering into symbolic narratives that provide meaning and context.

These applications offer clinicians sophisticated tools for working with experiences of evil and divine absence without either dismissing their spiritual dimensions or imposing rigid theological interpretations. Drawing on Jung's concept of the *coincidentia oppositorum* (coincidence of opposites), clinicians are encouraged to help patients hold the tension between experiences of divine absence and presence, between suffering and meaning, without premature resolution. This capacity to tolerate ambiguity and paradox is presented as essential to psychological maturation.



Figure 9

Engaging shadow material

All three theorists emphasize the importance of consciously engaging with disowned, feared, or rejected aspects of experience. In therapeutic contexts, this involves creating safe spaces for patients to express rage, despair, destructive impulses, and other shadow elements without judgment or premature interpretation.

The essays describe several approaches to shadow work drawn from these theoretical perspectives: Active imagination uses Jung's method of dialoguing with autonomous psychic contents to engage with shadow material. Archetypal amplification draws on Hillman's approach of connecting personal shadow material to cultural, mythological, or literary patterns that provide context and depth. Dialectical reframing applies Drob's kabbalistic perspective to understand how shadow elements might participate in larger developmental processes. Somatic awareness: Helping patients notice how shadow material manifests in bodily experience, providing a concrete anchor for exploring difficult psychological content.

Therapeutic healing frequently involves helping patients develop more nuanced moral frameworks that can accommodate the complexity and ambiguity of human experience. Drawing particularly on Hillman's work, I have found just how psychological healing often requires a symbolic descent into darker, chthonic aspects of psychic reality rather than a unidirectional movement toward light or transcendence. This perspective challenges therapeutic approaches that implicitly aim at eliminating suffering rather than finding meaning within it. The work has allowed me the following: Honoring depression recognizes how depressive states may reflect a necessary psychological descent rather than merely a pathology to be eliminated. Working with dreams and dream imagery points toward underworld consciousness or descent motifs [43]. Grief work creates space for the full experience of loss and mourning rather than rushing toward resolution or acceptance.

This reframing does not eliminate suffering but transforms the relationship to it by embedding it within a meaningful healing journey rather than viewing it as meaningless dysfunction.



Figure 10

Comparative analysis

While Jung, Hillman, and Drob offer distinct approaches to the problem of evil and divine absence, several common themes emerge that have significant implications for therapeutic practice. This comparative analysis highlights both the shared elements and distinctive contributions of each theorist, suggesting how they might be integrated into a comprehensive approach to working with experiences of evil and divine absence in therapeutic contexts.

All three theorists take the reality of evil seriously without reducing it to mere psychological projection or moral failing. This validates patients' experiences of suffering without dismissing their metaphysical or spiritual dimensions.

Jung's approach emphasizes how evil represents a psychological reality that must be engaged consciously rather than merely projected onto others or disowned as "not-self." His concept of the shadow provides a framework for understanding how disowned destructive potential operates autonomously when not integrated into conscious awareness.

Hillman extends this perspective by challenging the very categories of "good" and "evil," suggesting that what we label as pathological or evil may represent archetypal realities that have their own integrity and purpose within the psychic economy. Rather than seeking to eliminate these elements, Hillman advocates developing a more conscious relationship with them.

Drob's kabbalistic approach offers a metaphysical framework that neither reduces evil to psychological projection nor accepts it as an absolute reality opposed to the divine. Instead, he presents evil as a necessary moment in a dialectical process—a perspective that provides metaphysical context for suffering without diminishing its reality.

Rather than interpreting divine absence as evidence against spiritual realities, all three suggest that experiences of divine silence or withdrawal may serve important developmental functions. This perspective transforms experiences of abandonment or divine indifference from spiritual failures into potentially meaningful aspects of psychological and spiritual development.

Jung's portrayal of a developing God in *Answer to Job* suggests that divine absence may reflect not God's non-existence but a developmental moment in the evolution of divine consciousness. This radical perspective places responsibility on human beings to engage consciously with experiences of divine silence or amorality rather than merely submitting to or rejecting them [24].

Hillman's polytheistic approach reframes divine absence as the limitation of monotheistic consciousness rather than the absence of divine realities altogether. From this perspective, what appears as divine absence may reflect the presence of archetypal realities that monotheistic frameworks cannot recognize or integrate.

Drob's interpretation of *tzimtzum* provides the most fully articulated metaphysical framework for understanding divine absence as purposeful withdrawal rather than abandonment or non-existence. This concept suggests that divine absence creates necessary space for human freedom and development rather than representing divine failure or indifference.

Jung's concept of individuation emphasizes the necessity of consciously engaging with shadow elements rather than attempting to eliminate or transcend them. The process of becoming psychologically whole involves not the triumph of light over darkness but the integration of both into a more complex consciousness.

Hillman radicalizes this perspective by suggesting that pathologizing itself—the psyche's tendency to experience disorder, suffering, and dysfunction—represents an essential aspect of soul-making rather than a problem to be solved. From this view, experiences traditionally labeled as pathological may serve necessary psychological functions that should be engaged rather than eliminated.

Drob's dialectical approach similarly emphasizes how engagement with experiences of brokenness and suffering may participate in larger processes of repair and restoration (tikkun). Rather than viewing evil as a problem to be solved, Drob presents it as a necessary moment in a dialectical process that ultimately serves divine purposes.

All three recognize the limitations of purely rational or theological explanations for suffering. Instead, they emphasize imaginal, symbolic, and paradoxical approaches to making meaning of painful experiences.

Jung's emphasis on symbolic and archetypal dimensions of experience suggests that suffering may have meaning that transcends rational explanation. His concept of the archetype as "psychoid"—neither fully physical nor fully mental—points toward realities that exceed rational categorization and require symbolic engagement.

Hillman's insistence on the primacy of the image challenges rationalistic approaches to psychological suffering. His archetypal psychology privileges imaginal engagement over causal explanation, suggesting that healing comes not through explaining suffering but through deepening one's relationship with it as an imaginal reality.

Drob's kabbalistic hermeneutics similarly emphasizes how divine realities exceed rational comprehension, requiring paradoxical and symbolic modes of understanding. His concept of *coincidentia oppositorum* suggests that the deepest truths may manifest as apparent contradictions when approached through linear, rational thought.



Figure 11

The dialectical nature of healing

Jung's individuation process involves not the triumph of consciousness over the unconscious but the establishment of a dialectical relationship between conscious and unconscious elements. Similarly, his approach to the problem of evil suggests not the elimination of darkness but the integration of light and dark into a more complex consciousness.

Hillman's soul-making process similarly involves not the transcendence of pathology but the deepening of experience through pathologizing-allowing literal experiences to become psychological through suffering and disorder. This perspective suggests that what we label as healing may involve not the elimination of symptoms but the transformation of one's relationship to them.

Drob's kabbalistic approach explicitly frames healing as a dialectical process wherein experiences of brokenness participate in larger movements of repair and restoration. His concept of tikkun suggests that wholeness emerges not through the elimination of brokenness but through its conscious integration into larger patterns of meaning.

Conclusion

The analysis of Jung, Hillman, and Drob's approaches to the problem of evil and divine absence, reveals a profound paradox at the heart of therapeutic practice: the very experiences that seem most destructive to meaning and connection-suffering, evil, and divine absence-may, when properly engaged, become catalysts for deeper psychological and spiritual development. This paradoxical potential transforms how we understand both psychopathology and healing, suggesting that what appear as obstacles may function as essential aspects of the healing journey.

Several key principles emerge from this integration that can guide our healing clinical practice:

- First, clinicians must develop the capacity to sit with patients in spaces of divine absence and apparent meaninglessness without rushing to offer premature explanations or consolations. This therapeutic presence models the possibility of bearing unbearable experiences and creates space for authentic meaning to emerge from the patient's own engagement with suffering rather than being imposed from outside.
- Second, therapeutic approaches to evil and divine absence must balance psychological and spiritual perspectives, recognizing how these dimensions of experience interpenetrate and inform each other. Rather than privileging either psychological reduction or spiritual transcendence, clinicians can help patients develop nuanced perspectives that honor both the psychological complexity and spiritual significance of their experiences.
- Third, healing involves not the elimination of darkness but the development of a more complex consciousness that can integrate apparent opposites into meaningful relationship. This integration does not resolve paradox or eliminate suffering but transforms one's relationship to it through the development of greater capacity for meaning-making, symbolic understanding, and conscious engagement.
- Fourth, divine absence itself can function as a space of possibility-a necessary withdrawal that creates room for human freedom, development, and meaning-making. Rather than interpreting divine absence as abandonment or punishment, clinicians can help patients recognize how such experiences may participate in larger developmental processes that ultimately serve the evolution of consciousness.
- Finally, therapeutic healing involves not the achievement of static well-being but participation in an ongoing dialectical process wherein engagement with darkness, suffering, and absence continues to catalyze deeper levels of psychological and spiritual development. This dialectical understanding challenges therapeutic models focused primarily on symptom reduction or the achievement of stable happiness, suggesting instead that psychological health involves the capacity to find meaning within the full spectrum of human experience.

In an era when mental health discourse often emphasizes biological reductionism on one hand and spiritual bypassing on the other, the integration of Jung, Hillman, and Drob's approaches offers a middle path that honors both the psychological complexity and spiritual significance of human suffering. This integration suggests that the therapeutic encounter at its best serves not merely to eliminate

symptoms but to create space for the transformation of consciousness through meaningful engagement with the full spectrum of human experience-including those aspects traditionally labeled as evil or interpreted as divine absence.

In conclusion, these insights viewed through the theoretical lenses of Jung, Hillman, and Drob, demonstrate how the apparent absence of the divine and the problem of evil can be transformed from obstacles to pathways in the therapeutic journey. By engaging consciously with these challenging aspects of human experience-neither denying their reality nor accepting them as final-clinicians and patients can participate together in processes of psychological and spiritual development that deepen rather than transcend the human condition.

In this way, the therapeutic encounter itself becomes a space where divine absence paradoxically reveals itself as transformative presence, and the problem of evil opens into the possibility of more complex consciousness and deeper meaning.

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