

CHAPTER FOUR

THE INTERFACE BETWEEN MEDITATION AND PSYCHOTHERAPY

I. MODERN AND ANCIENT VISIONS OF NEUROSIS

When his book, *Psychotherapy East and West*,¹ appeared in 1961, Alan Watts remarked that “if we look deeply into such ways of life as Buddhism and Taoism, Vedanta and Yoga, we do not find either philosophy or religion as these are understood in the West. We find something more nearly resembling psychotherapy.” Conversely, Jacob Needleman in *The New Religions*² used this broad expression in a way encompassing characteristic *therapeutic* developments of the “New Age.”

It is true that certain statements or actions are better designated either as “therapeutic” or “spiritual” and yet it cannot be denied that both the spiritual endeavor and the therapeutic are concerned with the self-same ultimate goal of removing the obscuration of the human ego, so that the full expression of the person’s potentialities may unfold.

I don’t use the word “ego” here in the meaning of ego-psychology, but as is commonly used in both the popular and the

transpersonal languages in which it is usually viewed as the counterpart of the Self or Being. I don't make a distinction between calling this pain-perpetuating system of conditioned responses "neurosis," "samsara," "sinfulness," "fallenness" or "consciousness degradation."

Two systems may be distinguished within our body/mind: the total system, and a sub-system that asserts its separateness through consciousness barriers. The latter—call it ego, neurotic self or what you will—is a sort of mind-parasite that absorbs our life-energy and limits the expression of our potential.

Traditional spirituality has pointed to "ignorance," at the core of consciousness degradation, and viewed ignorance (*avidya*) as a darkening and confusion of the mind that renders it unable to sustain spiritual consciousness. Rather than interesting itself in the loss of the gnostic capacity of the mind, psychotherapy has addressed consciousness degradation in terms of the loss or distortion of a more worldly kind of awareness: the awareness of the obvious and the here and now, which includes the awareness of sensate and emotional, of our thoughts and of what we are doing with our life. Yet both traditions address only different levels of the consciousness issue, and coincide in seeing a loss of consciousness as a major factor in suffering.

Another pillar in the dysfunctional condition of the mind may be conceived as an over-desiring or excessive dependence on the satisfaction of desires. Buddhism calls this *tanha*, usually translated as craving, or sometimes simply as "desire."

Along with the obscuration of the subtle or contemplative mind and interference with self-experience and self-understanding, we may say that neurosis is also under the rule of deficiency-motivation. It may be argued that it is usually of deficiency-motivation that therapists speak when they use the word "libido," and I prefer to distinguish the libido of our over-desiring, passionate, sinful, or sick nature from the abundance of Eros. While eros (the life force or instinct) is abundance, libido, the degraded form

of eros, is anti-instinctual and constitutes the material out of which is fashioned the straight jacket in which instinct is contained.

Over-desiring corresponds to what in psychoanalytic language is called orality, and generally speaking, it may be said that we are fixated on an oral attitude that was healthy during the earliest part of our life and now has become an obsolete immaturity and a source of pain.

It has been a merit of psychotherapy to elucidate how the fixation on the condition of “oral” attachment has become established as an alarm reaction to frustration in early life. Oral greed in the adult is—according to Freud, Abraham et al.—the result of frustration of oral impulses in the past. More specifically, over-desiring is seen to echo the frustration of our yearning for mother’s breast during infancy. Yet insight into oral-receptiveness has not prevented a hedonistic bias in modern psychotherapy, which I think has resulted from the traditional emphasis on austerity.

To speak of desire in its broadest sense is to speak of both desire and counter-desire; that is to say: desire and aversion. And to say that in the endarkened condition there is slavery to both desire and aversion may be re-worded into saying that we are not only excessively oral-receptive, but fixated in an excessively frustrated and angry “oral-aggressive” attitude: it is as if the biting response that followed our sucking response in infancy had persisted too much, turning into our present biting attitude toward others, ourselves and even Heaven; as if in our present hatefulness we were seeking to get even for our original love-frustration through an excessive active reaching-out that psychoanalysis has called “cannibalistic.”

Buddhism speaks of a triad of core factors in the endarkened condition, to which it refers as “the three poisons”: greed, aversion and ignorance. This, in turn, may be reworded by stating that at the core of neurosis there is an interplay of desire and

aversion (“love” and hate) in the field of an active unconscious—a lowering of consciousness that seems to involve the preference for the *status quo* through attachment to a meager level of satisfaction (in view of an avoidance of the possibility of greater dissatisfaction).

The view of modern psychology is also congruent with the view of the old traditions in the recognition that mind-deterioration is not a cognitive and emotional process alone. The fall is “karmic,” and to some extent hereditary. The world of the mind, like that of nature, operates according to strict causality, and in the causal chain of events the weight of the past impinges on the present.

Traditional spirituality has emphasized the *karma* of earlier and forgotten lifetimes. The therapeutic tradition, conversely, emphasizes the equally forgotten or unconscious impingement of the early environment on the developing child. I wonder how much of what traditionally has been ascribed to the unknown pre-individual past may correspond to the equally unknown forgotten past of childhood, in the course of which the child psyche is formed, in the context of relationship to the mind of its parents.

Of course, psychotherapy mostly echoes the traditional recognition that there is a going from here to there: a healing process. From the point of view of conditioning, the healing of neurosis needs to involve a measure of transcendence of (or a relative freedom vis-a-vis) the body: a death to the past. From the point of view of emotion, the way may be characterized as a shift from greed and need, to love—i.e., from deficiency to abundance motivation. Psychotherapy and the wisdom traditions alike, however, have stressed the pursuit of consciousness: a recovery of physical, emotional and cognitive awareness, amounting to a recovery of the capacity to experience. I imagine that at least some therapists today would be open to the notion that the healing process may culminate in the healing of the subtler cognition that makes spiritual awareness (gnosis or wisdom) possible.

The old mystery of death/re-birth, known to the initiates of all traditions, is being rediscovered today as it becomes increasingly clear that the most successful therapy involves an ego-death process (brought about through insight) that makes possible the ever-widening unfolding of healthy life.

Another aspect that the old traditions and therapy are in agreement about is the critical role of the helping relationship in personal development. What we today call therapeutic has been part of the role of teachers or priests in various traditions, though teacher-student interactions have occurred only in an oral-aural domain that has been scarcely documented. Zalman Schachter has devoted a book to the subject³ in the Hassidic tradition, and it is possible to form some idea of how Sufi masters dealt with some well known human quirks through books such as Shah's *Thinkers of the East*.⁴

With these considerations as background, I now turn to the more specific subject announced through this chapter's title: the interface between meditation and psychotherapy.

Surely, meditation has come to be the most important method of transpersonal psychology, and meditation practitioners frequently seek psychotherapeutic help, at least at some point in their development—but where, in what, or how do meditation and psychotherapy meet? Asking about the interface between meditation and psychotherapy means understanding what processes are common to both. By extension, it may involve contributing to a general or unified theory of meditation and psychotherapy.

I will be carrying out the inquiry through an application to psychotherapy of such concepts as have emerged from my reflections concerning meditation, for the converse is less illuminating: to look at meditation in terms of the processes involved in psychotherapy soon reveals that the more unique aspects of psychotherapy are intrinsically interpersonal.

Thus meditation involves awareness practice, and awareness of the here and now naturally leading to insight—both worldly

and, possibly, even metaphysical. Though nobody can be aware for another—still one person's self-awareness and his or her intuition of another may combine into an ability to assist the development of another's awareness and insight. Self-awareness and self-knowledge, which are functions of a person's inner development, seem to be endowed with a certain "infectiousness"; however, this is one of the factors operating in therapeutic groups, and is ever more striking in the case of the specially wise individuals who can be enlightening mirrors to others with a minimum of words, seemingly through presence alone.

The same is true of the individual's development of healthy love of self—without which compassion becomes hypocritical and no real path is possible. Whatever development in the love of self and others may come from traditional spiritual practice and whatever help may arise from psychological insight, being in relation to a loving person is always of help, and sometimes the only way out of "walking in circles." Just as a fortunate person learns to accept and value his/her self under the protective umbrella of mother's love, one who has been devoured by a hateful ego may be rescued in adult life through the experience of relating to a truly benevolent guide.

As I will be arguing, an important aspect of therapy is the restoration of spontaneity, and here too, the presence of another may induce in the individual a greater measure in surrender than could be possible in isolation. To go beyond his present limits a person may not only need to be reassured and cared for, but also the stimulus of a contagion in inner freedom may come about through a subtle modeling.

All this may be summarized as "the magic of the other," and to this is added, in the helping relationship, a factor of know-how, comprising professional methods and strategies. Furthermore, there is in the healing relationship a factor of creativity and inspiration on the part of the therapist or guide which, like the factor of interpersonal contagion, cannot be reduced to such notions as I have elaborated upon while theorizing on meditation.

After this proviso, then, I turn to a consideration of what in psychotherapy *can* be understood in terms similar to those of meditation.

I have always been keenly aware of how psychotherapy is always more than what it purports to be. Real psychotherapy is eminently an art, and it always does more than what is explicit in the mind of its practitioners. Just as life may contain our theories and not be exhausted by them, psychotherapy, I think, vastly transcends the theories of psychotherapists. In view of the situation it seems most appropriate to inquire into how psychotherapy may appear in light of the concepts about the path of transformation, concepts that seem congruent with practices that have proved their efficacy across the centuries.

II. PSYCHOTHERAPY IN LIGHT OF THE SIX COMPONENTS OF MEDITATION

1) Mindfulness and creative imagination

As I turn to a consideration of psychotherapy in light of the proposed model of meditation, I begin with the issue of attention. Meditation, we saw, involves attention—not only when we pay attention to the contents of the mind in the here and now (as in *vipassana*), but where we focus our attention on symbols, colors, forms or concepts evocative of ultimate reality and sacredness.

It is clear to which end of the mindfulness/God-mindedness dimension psychotherapy gravitates. Increasingly, throughout its history, psychotherapy has involved the recognition of the healing potential of awareness. While Freudian insight involved mostly the recovery of full awareness of the past and awareness of what the person is doing in his life of relationships, its interest shifted more and more to an awareness of the therapeutic (transferential) relationship, and to a consideration of the relevance of non-verbal awareness. Along with these, there devel-

oped (first in Gestalt therapy and then more generally) an appreciation for the healing virtue of awareness in itself, beyond specific contents. The pervasiveness of body therapies and the introduction of bio-feedback as complements to verbal therapies reflect the importance given to simple awareness by those who help others to grow emotionally; it may be said that without the grounding of the sensate here and now, it is easy to fantasize instead of acknowledging one's true emotional reality.

Yet while both mindfulness and God-mindedness are important in giving an account of meditation experience, it is not so in the field of psychotherapy, in which the increasing recognition of the importance of awareness has not been matched by comparable consensus on the therapeutic implications of God-mindedness. In spite of the transpersonal tendency and the spiritualization of psychotherapy, spiritual experience in our secular therapeutic tradition has been under-played, both as a therapeutic factor and as an aspect of therapeutic unfolding.

Religiosity declined in the modern world when the strictures of the patriarchal church inhibited mysticism; and when transcending authoritarianism involved throwing out the baby (i.e. God-mindedness) with the bath water.

Yet not only are religious *experiences* important to healing; a religious *view* can also make a difference, and should not be incompatible with self-knowledge or behavior modification. It is not the same for the individual to regard himself as one seeking relief from pain and help from another, or to understand his pain as something that exists in the context of a condition of obscuratation and a estrangement from reality, and who sees himself in a journey to a sacred goal.

Surely the Christian understanding became so contaminated that we now need to put the old wine into new barrels, and if we look for God-mindedness in psychotherapy, we find it, for instance, in the Jungian approach; for under the notion of archetypes Jung may be said to have smuggled religion into the West under scientific garb.

An old rabbi used to advise filling one's head with God as a preparation toward an eventual experience of the divine, and it may be similarly said that filling one's head with the lives of the Greek gods or with alchemical symbolism (on occasion of interpretation of one's dreams) likewise contributes to eventual experiences in the domain thus symbolized. Yet the Jungian process is often all too detached and intellectual, and its power to bring sacredness into the therapeutic process rather limited when compared to traditional spiritual contexts. The same might be said of psycho-synthesis or other work with archetypal imagery: though archetypes are essentially sacred symbols or symbols of sacredness, a desacralizing scientific distance is implied in their very conception as "organs of the psyche's collective unconscious." Bringing God-mindedness to psychotherapy will necessarily mean, above all, bringing sacredness into the person's life and path, and for one with a faith, nothing could be better than the attempt to "remember" God. Not only can this be compatible with the rest of the therapeutic endeavor, but the individual's sense of the divine will always add something to his horizon, widening somewhat the context of whatever the situation was without it.

While traditional contributions to God-mindedness are perfectly compatible as complements to psychotherapy, it is also true that they are not so congruent with the intellectual climate of our secular world. It is easier to engender the sense of the divine in our minds if we have the support of faith, and faith is harder to sustain in our increasingly materialistic contemporary culture. Perhaps it would behoove us to adopt the attitude of some practitioners in Tibetan Buddhism who know quite well the extraordinary powers of the Gods and yet recognize that they are creations of the mind. But "creation" here is a completely different matter from imagination; for imagination only serves as a support for such potential of the human mind, which Corbin, in his account of Ibn 'Arabi, calls "creative imagination."

Idries Shah used the expression “constructive conception” for ways of viewing, the truth of which lies not in an earlier state of affairs but in the result of their being embraced. Thus in the teaching tale of Mushkil Gusha, a wood-cutter is told by a voice to close his eyes and climb certain steps before him. He is standing alone in a forest, and knows very well that there are no such steps; yet as he climbs, the steps arise under his feet and he finds himself in a completely different place—from which he then returns enriched. So it is in our inner life: when we assume something to be the case, this makes a difference in our experience and in the unfolding of events. Such is the truth of oracles, too, which work for us when we take them to be true.

But aside from simple faith (and considerations on the reality of sacralization beyond any particular form or belief), I think the most powerful resource toward God-mindedness today may be—as it was in shamanistic cultures—music—or rather, music when intentionally used as a form of devotion, as is further explained in Chapter 7.

2) Spontaneity and mental discipline in psychotherapy

I now turn to a consideration of the therapeutic relevance of what I have called the stop/go dimension of meditation and of the mind.

It is apparent from the outset that here again psychotherapy capitalizes on one end of the continuum, for the issue of impulse liberation is much more apparent in it than that of mind-control.

Since Freud, to speak of psychotherapy has been more or less equivalent to speaking of “a talking cure”—i.e., a healing process mediated by verbal communication; also, the gist of such communication therapy has been, from the very beginning, an attempt to let go of conditioned and social limitations. As the discipline matured, it became increasingly conscious of its being a “path of authenticity.”

It is of interest to note that the original impulse to the development of psychotherapy in the modern world came from Mesmer, since Freud's first interest was in hypnosis. There was more to Mesmer's cures than hypnotic trance, however, for these came about through an invitation to surrender to a healing force. No matter how inconvenient, such surrender served as an occasion for the individual's self-healing potential to come into operation. It was from the flow of spontaneous ideation in hypnosis that Freud derived the technique of free-association that—itself an implicit expression of the principle of spontaneity—constituted the background of psychoanalytic developments.

After Freud, the cultivation of spontaneity may be said to have been carried forward on two fronts. Moreno describes psycho-synthesis as a deliberate education in spontaneity, and Reich went a step beyond Freud in his belief of the full liberation of instinct and in his emphasis on sexual liberation. Later still came Gestalt and other existential therapies, along with the more radical notion of therapy that is accomplished through genuineness and a willingness to surrender to inner processes, trusting their intrinsic wisdom rather than attempting to control them.

From an important point of view, then, psychotherapy may be regarded as an assisted liberation from the barriers of the ego through yielding to “organismic” self-regulation, and it seems valid, then, to say that psychotherapy has, throughout its history, healed many of its clients through the liberation of their spontaneity.

While in the field of meditation it is clear that both learning to let go and learning to develop a disciplined and one-pointed calm are prominent spiritual practices, in the realm of therapy the Dionysian element is much more prominent than the Apollonian. While “Peace of Mind” is a widely acknowledged goal of mental health, its formulation hardly takes into account anything comparable to the “mental control” involved in the cultivation of one-

pointedness. Except for an appreciation of relaxation as an antidote for stress, the idea of impulse-control as a part of therapy seems to have gone out of the window along with God-mindedness in our days of modern secularism and post-Victorian instinctual liberation.

Since the modern West discovered the right and freedom to seek one's happiness, it has—not without reason—disdained preachers of virtue. Nietzsche, the greatest advocate of the Dionysian spirit in the modern world, preached against preachers of “virtue,” proclaiming them to be preachers of comfort in disguise. Unfortunately, however, “virtue” itself has been denigrated after their fall, as if suspected to be nothing other than a tool of authoritarian manipulation. Yet this has been another case of throwing away a value along with its falsification, for “virtue”—i.e., the struggle against the ego in the life of relationships—has been endorsed by the greatest sages and effectively pursued as an aspect of the path to the realized condition. Ethical practice was the preventive psychotherapy of pre-modern times, and today psychotherapy might be likened to a “lazy man's way to virtue”: a way to improve relationships and choices “without really trying.” Not that there is no effort in it (aside from monetary cost) but the explicit pursuit now is mostly one of insight, and it is insight that is offered as a means to decreasing suffering—while behavioral change is expected to follow spontaneously from self-understanding.

Through insight there comes about healing, indeed (and “virtue” results from a sort of self-digestion of ego in consequence of insight into the destructiveness of our neurotic needs); I think that the hedonistic bias of psychotherapy has resulted in an insufficient understanding of self-control as an aspect of health and the healing process. In spite of its eclectic and integrative attitude, psychotherapy has failed to integrate its Apollonian and Dionysian means, values and perspectives.

While the spiritual traditions have emphasized working on oneself on the process of transformative healing by striving for

right action and wisdom, in a consumer society that doesn't trust the message of old religions, psychotherapy emphasizes what help may be obtained by paying a guide and a coach, and the spiritual inertia that is easily encouraged by the "medical model" is likely to become a trap if there is not a proper understanding of ego-transcendence as an aspect of the therapeutic task. Voluntary-inhibition of egoic manifestations is an implicit aspect of behavior and cognitive therapy, however, and also of brief and family systems therapy, and I think that it may be an increasingly significant item in the therapist's prescription repertoire.

Summing up: a wise integrative therapy today would be one which is appreciative of both surrender to the pleasure principle and the austerity of ego-frustration; for the ego (or karmic identity) burns in the austerity of self-discipline just as it burns in the austerity of meditation.

3) *Love and non-attachment*

Finally, I turn to the affective dimension of meditation and of the mind, concerning which it is immediately apparent that just as psycho-pathology involves a loss of awareness and a loss of spontaneity, it involves a loss in the ability to love.

Love does not only affect the quality of interpersonal relationships, but also the motivation to work—since work is always an act of love for self or other—and, since the psychoanalytic conception of health as genital libido, therapies have mostly included love in their statement of intent. Freud is often quoted, indeed, for his definition of psychoanalysis as a means to the recovery of the ability to love and work. After him, it was specially Erich Fromm's view of the productive person that emphasized the ability to love self and other.

And yet neither the Freudian instinct theory nor the behaviorist learning theory are suitable to a discussion of love (except through some *tour de force* or another), and "love" is a word that has been generally avoided in psychological discourse—which in

its scientific aspiration has tended to stay away from the subjective and eschew the pre-scientific, preferring to talk about such things as “positive emotional reinforcement” and “sublimated erotic impulses.”

Even in the field of practical psychotherapy, where it should be obvious that the restoration of health implies the recovery of the person’s ability to love, the issue has been obscured by the relatively recent concern of therapy with the healing of aggression. True as it may be that people need to know and accept their anger before transcending the childish ambivalence that is part of the neurotic condition, I think that the theory and practice of psychotherapy would gain from an explicit acknowledgment of love as an aspect of health and healing inseparable from awareness and spontaneity.

Yet psychotherapy has greatly added to what spiritual traditions have been able to offer by way of assisting people to become less hateful. Specialists in the realm of dynamic therapy as well as their patients are well aware of how love conflicts with resentment and is interfered by vindictiveness, and how these, in turn, are the residues of early wounds.

Dissolving the defensiveness that was adopted in the face of early pain can be greatly assisted through insight, and this is not precisely the approach meant by Buddha in his metaphors of the arrow and of the fire. (When you are wounded, you don’t ask who shot the arrow nor why it was shot, he pointed out, but endeavor to pull it out. When there is fire, too, you don’t waste time investigating who started it.)

Meditation is like that: it seeks to relinquish karma “here and now” through a transient neutrality that permits a sort of “dying to the past.” Therapy, by contrast, steps forward to meet the haunting past that wants to make itself present in the now, like a hungry ghost that needs to be taken care of. It takes the position that something needs to be taken care of, and specializes, so to say, in the belated digestion of the past—implicitly or explicitly assuming that something needs to be learned in the process.

“Purification” in the therapeutic process occurs not through some intentional relinquishment then, but through the inner digestive juices of psychological understanding.

A therapeutic approach that offers special interest in this discussion not only because of its orientation to love but through some strategical contributions (and in view of its powerful therapeutic impact) is Hoffman’s Quadrinity Process, to which I have devoted a chapter in *The End of Patriarchy*.⁵

Alice Miller⁶ has discussed how the forgiveness of parents is intrinsic to the psychoanalytic cure, and how the process of understanding one’s life history and the predicament of one’s parents is, in the best cases, seen as preparatory to compassion and forgiveness. This seems to arise sometimes by its own accord when the individual has made enough therapeutic progress, but not reliably so. In view of this focus on forgiving one’s parents, I believe Hoffman’s approach constitutes a major contribution to a person’s recovery of the ability to love.

Love exists in the fundamental categories of self-love, love of others, and love of the divine (the Highest, Life, Truth, The Human Prototype, Mother Nature or the transcendent Ground, etc.). Love of others began with the love of parents; and loving oneself entails becoming like a mother toward ourselves, concerned with our well being and happiness, and taking pleasure in our pleasure. To love the divine may or may not be directed to an anthropomorphic representation of God or an idea of God as Person. It may be expressed as love of life or of justice. It may be clothed in a love of art, or it may manifest as a seeking of a higher truth, or simply in striving for self-improvement.

I suppose most contemporary psychoanalysts regard God a “transitional object” (like a teddy bear) to the love of others (tellingly called “object love”!). Be it as it may, I think loving divine perfection is easier than loving imperfect humans, and I think the exercising of love in devotion may be to loving people a transition comparable to what the practice of ego-suspension in meditation is to ego-less behavior in the world. It seems that love

needs to be exercised, even if we are too angry at ourselves and the world to love any particular beings, and the devotional situation (which is one of loving the source of love), constitutes a way to exercise love in itself.

If I am correct in this view, it would behoove therapists to further their client's devotional expression rather than interpreting it one-sidedly as an escape from the world and fearing it as potential interference or competition.

Practicing love of the divine cannot of course be separated from simple concentration on the divine through contemplation or visualization practices, and also in this case it is enough for therapists to understand the therapeutic relevance of the issue and refer their patients to the appropriate specialists and resources.

Though I will be saying more in the chapter specially devoted to music as meditation, let me just suggest that music is as important as it is to us *mainly* because, without our explicit knowledge, it stimulates in us various nuances of transpersonal loving. When music listening is turned into a conscious exercise in love through empathic listening, singing or playing, the result is likely to be rewarding enough to repeat and perhaps lead to an enrichment of both music listening and emotional life.

Of course, self-love is one of the expressions of love, and we may say that when love is present, it shines evenly over self and other. The idea of liberation of instinct from the strictures of social conditioning and character has been a generalized feature of modern therapies since Reich, and we may re-contextualize such liberation into the framework of a shift from self-rejection and self-hate to self-acceptance and self-love.

While in the realm of spiritual disciplines the cultivation of non-attachment has been as prominent as that of devotion, and austerity as prominent as compassion, again in regard to the domain of therapy the issue of love has definitely been in the foreground, while that of non-attachment has been relatively neglected.

Not only in meditation can the ego burn in *tapas* (austerity), however, but there opens up before the person the opportunity of life itself as a field in which the struggle toward the undoing of the ego may be pursued. A necessary struggle this is, that requires austerity to sustain egoic frustration and to inhibit the temptation of neurotic needs for the sake of re-learning.

Gurdjieff, a master in ego-confrontation, spoke of “The Work” as “conscious-suffering,” and also Perls—who resembled Gurdjieff as confrontator and awakener—was keenly aware of the need to open up to pain as also to find a healthy attitude before it. How he thought and how he felt about the “niceness” of professional therapists at the time is echoed in Resnik’s “chicken soup is poison,” which became a well known Gestalt slogan.

“To the sick man sweet tastes bitter,” wrote Al Ghazzali, and this might be translated into saying that for the ego there is frustration rather than pleasure in those things that are sweet to the healthy self. To the extent that this is so, a hedonistically biased approach could not work. True as it is that truth can set us free of suffering, then, truth does not come without some suffering. On the way to paradise, there seems to be no alternative to a time in purgatory if not in hell. In such a journey, non-attachment is the vehicle of choice, while self-comfort and fearful self-protectiveness are hindrances.

At a round-table that followed upon Dr. Grof’s opening address at the 1982 meeting of the ITA in Bombay, Dr. Frances Vaughan, then president of the Transpersonal Association asked me what was my view of a “healthy spiritual development.” I thought this an all-too-American question that amounted to asking for a sanitized “death and resurrection in the comfort of your own home,” and I said something to the effect that the transpersonal movement has not been exempt of the hedonistic bias characteristic of humanistic psychology en general, and that this has reflected in an imbalance between the pursuit of ecstasy and the willingness to deal with the pain of psycho-dynamic

inquiry. A spirituality in which there is no sufficient openness to pain easily becomes an escape from life, with its toil, its discipline, its lingering wounds of the past, and the frustration of present imperfections.

The development of consciousness is not a straight ladder to heaven, as an intellectual might want to depict it; I argued: growth is cyclic, a pulsating process better represented by a spiral than by a straight line, in which the way up is at the same time the way down. And psychotherapy cannot fail to be part of a quest in which the person needs to be a kind of hero willing to embrace pain for the sake of the quest's goal. The vocation to grow (and to eventually blossom into the fullness of our consciousness and potential) is inseparable from our nature, and an excessive concern for comfort or attachment to the self-image is not conducive to the best results.

Because many today—therapists included—are inclined to see asceticism as the expression of a pathological turning against the self, it may be well to emphasize both *tapas* and moral discipline as universally acknowledged aspects of human development, and suggest that much is to be expected of the association between behavior modification and an ennea-type informed cognitivism.

When I started theorizing about meditation, I conceived a complementarity between love and non-attachment, yet in the process of developing my ideas in light of the enneagram I have thought it is more appropriate to use the words “compassion” and “austerity.” Compassion is the persistence of love in spite of pain, austerity involves the non-avoidance of pain and non-pursuit of pleasure in the attempt to transcend desire/aversion.

While I am not undertaking to elaborate further on how psychotherapy may look from the point of view of non-attachment, I want, least, to say something of how non-attachment loomed large in the work of the most notable of modern Dionysians—and also one of the most powerful of therapists: Fritz Perls.

A person weeping over the reminiscence of some childhood suffering may scarcely need words to convey an invitation to a more healthy attitude in face of the painful memory. Perls' gaze, like that of Gurdjieff, was of the kind more generally associated to the figure of Bodhidharma: a gaze at the same time piercing and non-involved, which to many seemed to convey a "so what" in face of the childishness of neurotic problems. "So what? Do you want to hold on to that forever? Do you want to mourn forever over spilled milk?"

I have frequently talked about the great treasure that was the transmission of Fritz's detachment, the ability to not be involved in the "games people play." Being a combination of creative indifference and self-support, I at first called it his "so whatness."

Since I see growth as inseparable from outgrowing, and do not think that there can be outgrowing without detachment, I of course believe that an enrichment of psychotherapy in light of a conscious consideration of the non-attachment issue would be desirable, and in the two chapters following this one—"Interpersonal Meditation" and "Free Association in a Meditative Context/A Therapeutic and Educational Proposal"—I offer a sample of my own contribution to the field.

4) The therapeutic relevance of metaphysical insight

To discuss the aspects of meditation mapped by the inner triangle of the enneagram amounts to discussing that deep meditative realization that cannot be properly called meditation since it constitutes the unveiling of a pre-existing condition, an underlying or buried consciousness. Some may want to call it the truth of Being, others, the truth of Voidness, or our true identity: the essence of our consciousness.

It may seem absurd to ask how enlightenment can help psychotherapy, for it seems that the question should be turned around. Yet the way in which psychotherapy can help enlightenment is something that I have already been addressing while

speaking of the restoration of awareness, spontaneity and love, and something remains to be said as to how an “enlightened world view” can help along the way.

After explicitly stating that, indeed, our way of seeing things can influence our progress, I hasten to clarify that I have no intention of recommending that therapists seek to become teachers of spiritual philosophy; for wisdom is something to be pursued for itself rather than for professional achievement, and it is enough, I think, that we trust that our understanding will spontaneously help others, and that we can orient others to the relevant books and experts.

Whatever their traditional language, it is the same vision that is transmitted by all the wisdom traditions. It is well to bear in mind, however, that what some call the “truth of the self” and others “the truth of no-self” or the “realization of the essence of mind” constitutes “metaphysical” (cosmologic-anthropologic-spiritual) insight that not only illuminates meditation but carries the potential of eclipsing all egoic problems—which are, after all, (the sapiential traditions agree) the consequences or complications of spiritual obscuration.

Psychotherapy today doesn’t have anything like a transformative teaching to offer in its present stage of development, so I think it behooves contemporary professionals to take into account the potential of such mental understanding and the availability of wisdom teachings in the different cultures.⁷

III. PSYCHOTHERAPY AND THE KUNDALINI PROCESS

The conception of “kundalini” that I have proposed—a heightened mode of operation of organismic function made possible through the suspension of the ego—amounts to a definition of health. The full unfolding of the kundalini *shakti* in the mythical 72,000 *nadis* is simply the physical aspect enlighten-

ment, which intrinsically encompasses mental health. And if the physical process of transformation that is part of human metamorphosis involves a progressive liberation of the subtle spontaneity of the body at rest, it must be part of psychotherapy—to the extent that also therapy aims at the spontaneity of feelings, and, more generally, of the mind.

If as I have argued, psychotherapy stresses the cultivation of spontaneity, it is only natural that the condition of heightened spontaneity that it promotes may be “stepped up,” so to say, to the “kundalini level.” In other words, it is only natural for psychotherapy to lead to a kundalini arousal—that point in the psycho-spiritual transformation process at which the body begins to undergo that “energetic liberation” that, as we know, seems to constitute a more or less hidden underside of spiritual growth—known to entrain in turn additional spiritual and mental phenomena.

In telling about instances in which the *pranic* component of kundalini is so apparent, I don't want to narrow the subject to instances in which automatic movement or *pranic* phenomena come to the foreground, for perhaps the way in which psychotherapy, in the process of liberating the person from his ego, becomes an entry into the serpentine domain, may take a form in which other aspects of the kundalini phenomenon are more apparent—such as the mediumistic or the visionary. Mostly, I want to draw attention to the fact that successful psychotherapy of one kind or another may come to a point where, as in spiritual life, the sufficiently purified individual is reborn to another level of life where the “Great Goddess” Herself becomes the healer and guide.

In the world of specific therapies there is one that I find particularly conducive to a kundalini arousal, and it has not emerged from the sphere of insight therapy but from a therapeutic application of dance: “authentic movement,” created by Mary Whitehouse and taught today particularly by Janet Adler. It might

be described as a *Latihan* minus its explicitly religious context, and Janet Adler's book⁸ could well be described as the story of a segment in her own kundalini ripening.

I have already mentioned how Gestalt therapy was the context of my own kundalini awakening, and can now add that, as a psychotherapist using Gestalt, I too have been a witness to kundalini arousals.

In the pages that follow I transcribe a complete case recorded in Esalen in 1968/9, when, pioneering as I may have been, I was also a beginner. It is not the only time when I have seen psychological work trigger a top/bottom opening of the *prana*-stream. However short the session may have fallen of bringing about complete liberation of the patient's body or emotional life, it is clear that the sense of fluid orbiting his body along with fire in his belly were triggered in him in the process of re-owning the content of his dream.

Franz: I had a dream and I tried to figure it out myself but I don't know if I really did. It was a very disturbing dream. I have a little five-year-old girl that I love with such an intensity that it's sort of a ... we're sort of one person. And I call her "Sweetie-pie." And, ah, and I had a dream in which ah, she was hanging up on a rope from a beam similar to these beams. And her, she was still alive, though, but she, her head was kind of crooked, like this. And she was looking at me like ah, "Well Daddy I don't like this but if you really want to do it, that's OK." And ah, ... there was a butcher knife and I took the back end of it—the back side—and I took it and I pushed it through and decapitated her. And then I woke up and was just hideously in very much pain. You know. I just ached all over. And that was the end of the dream.

Naranjo: Could you imagine yourself in the position of your daughter just as you saw her in the dream and share with us how it feels to be her in that position? Give words to what she did not say in the dream but she might be feeling.

F: Well, from the expression on her face it sort of looked like she was just this (shows) and saying, you know, "You know, Daddy, I don't really like this, but ..."

N: Now you are her. Develop that.

F: Okay, Daddy, I don't really like this, but ah, I'll go along with you if that's what you want. ... It's sort of like she is very much afraid, you know, but she is being very brave. "I'm very much afraid, but I'm being very brave because I like you a lot too, and I'll do whatever you want."

N: Now continue this dialogue. In the dream it was one sided, but now go on dreaming, so to say, and respond to her. She's just told you that you really want this and ...

F: I'm myself now. (20 sec. pause)

N: What do you feel right now?

F: Very confused.

N: See if you can get in touch with the feeling by describing it.

F: (Long pause. Stands with eyes closed and lowered head. Starts using left arm forward.) There's just something in my arm. My arm feels like a lever. The confusion is going away now. It's just like a mechanical lever. ... It's like there's some hidden force there that I'm not aware of what it is.

N: Maybe you can tell her this now, that you cannot help doing what you are doing; that your arm is like a lever and so forth.

F: Sweetie-pie, my arm is like a lever and it's really going by itself. I, I don't really have control over it.

N: What was the feeling then?

F: It's like there's something just driving straight out and, and it wants to keep going and I have to kind of break it and ... (tension in voice in last sentence.)

N: Stay with it. Develop this feeling, or maybe express this, in movement or words or something.

F: There's something out there *pulling* me. It's, there's, (struggling) there's something out there. There's on my hand, too ... (struggling) Oohh! (acting out) I feel something pulling it. (Pulls again for about 10 sec. of verbal struggling.)

N: Any other image aside from the rope?

F: Well, there's something else but it's so vague I don't know what it is. It's like the rope goes off into, into kind of a gray and white cloud or something which just disappears.

N: That sounds familiar, from what you have been saying during the week; your gray man ...⁹ OK, even though it's vague, imagine you are this thing pulling you — the rope or whatever is behind the rope pulling. Try to merge with that, Franz, and you are pulling Franz, and having him perform that action.

F: (pause) That really throws me because ... I'm having him perform.

N: You're having what?

F: That, that throws me. I'm, I, I can't get in tune with that right now—that I'm the one who is controlling Franz. You know; I'm having him performing; like I got him over there and I'm pulling him...

N: How does it feel to have him perform what you want?

F: But I don't want him to do that. I don't want him to perform that way and, and I don't want to pull him either. It's ah, the fact is that I'm just pulling and the rope's slipping through his hands. Yeah. That, it really isn't working. ... My, my hands feel like clubs. They don't feel like hands anymore. They feel like clubs with knots on the ends. I, I don't even feel the rope anymore...

N: Now let your hands speak. Imagine your hands can say what they feel.

F: These hands are solid. They ah, they're like a rock on the end of a stick and they're, they're very hard. And ah, and there's some kind of a life inside, though; there's something moving inside the rocks as, it's like a, a worm or something inside crawling around.

N: Let that life inside speak. You are now that life crawling around inside the rock.

F: (silence) There's, there's some kind of a, there's a pump. There's a pump pumping something. It's, it's a surge; some kind of surge.

N: "I am a pump."

F: Pump. It, it just goes around and around like this, and it's a, a pump that surges around and around inside the rock like this.

(Indicates a circular movement in his body, up his back and down his front.)

N: Then feel that pump surging. Continue to identify with it ... What does it want?

F: I've got a pipe coming in my head. You know? There is a pipe coming in the top of me and one going out the bottom, and I'm circulating something. And I ache all over. This pump is, it's got a lot of strain, too. There's a lot of parts in it that are about to break. There's ah, it's like ah, a little more pressure and the pump will break apart. Much pressure in the pump.

N: Continue speaking as pump. "More pressure and *I* will break apart." Be one with the pump.

F: I, I have parts sort of like sides. There's much pressure in me and I feel that if the pressure gets any greater these sides will break.

N: Repeat this a few more times but feeling that Franz is saying this.

F: I'm Franz and, and I have a lot of things going th-through from my head through my bottom. Sort of like there's something from my head to my bottom. It's sort of like there's something coming out of my rectum. Pumps in my head and goes out my rectum. And I feel like if I get any more pressure I'm gonna break.

N: Keep repeating this last statement.

F: And I feel like if I get any more pressure in me I'm gonna break... And I feel like if I get any more pressure in me I'm gonna break... My rip cage feels like it's gonna break. It's (breathing laboriously) if I (rasping) get any more pressure in me I'm gonna break.

N: Could you imagine yourself saying this to your daughter? Try and see what meaning the statement takes on.

F: Ohh. Oh Sweetie-pie. If I get any more pressure in me I'm gonna break. Oh, things *are* breaking. There's something breaking inside of me. There's there's something breaking.

N: Tell her more about that.

F: (still rather rasping, tired and strained) It feels like my backbone is splitting down the middle and there's something inside of me that's green and sort of squiggly. Oh, oh, *my* backbone!

N: Go with it and let yourself break.

F: Oohh. And my head's breaking, too. (strained) The pressure's in my head ... my backbone ... I'm afraid to let go. Oh, my back hurts.

N: Could you let go some more?

F: Ohhh. (sighs and struggles) ... Ohhh, Oh, my stomach hurts now. Ohh, and my head hurts.

N: Let go as much as you can and let what wants out, even if you feel that you can break some more.

F: Oh yeah, (still struggling physically and vocally) my hip wants to break. Ohh. Oh, my foot wants to break. Oh, ohh. Ohhhh ... ohhh... ohh. I want let it break but it won't break. There's something holding it. There's something keeping it from breaking. There's like a sack around my feet, like a board or like a leather boot ... Ohhhh! Oh ohhh.

N: Is the pressure greater now?

F: Oh, it's breaking my back again! Oh and my arms are frozen. Ohhhh. Ohhhh.

N: Do you still feel that green thing inside?

F: (whispers at first) It's just a, a little green cloud now.

N: Just put your attention there for a while.

F: (very softly) I'm scared. I'm frozen. I can't move. My back hurts and my arms are frozen. My head hurts. That, that iron band is around my head again. There's an iron band around my head.

N: OK, see if you can now stretch and become that iron band. Be that which is paralyzing you. Feel yourself now as metal constraining you and making you hurt.

F: I'm just starting to pump again. I'm throbbing all over. (All this still almost inaudible) My fingers are throbbing again. My pump is back in me again. I'm off again. I'm pumping. I think the iron band is a pump. It's pumping things through my head.

N: It seems you feel more comfortable being the iron band around you and squeezing Franz than being the victim of the squeezing.

F: Yeah. A little more. My, my back quit hurting. Only my hands are, my hands are just pumping or throbbing. They just throb. They're pulsing.

N: OK, see if you could now have a dialogue between these two sides of you; Franz the paralyzed, frozen one, and the pump or the metal band, as you wish. See what they have to say to each other. You might start with Franz paralyzed and talking to this band.

F: I'm, I'm stiff and I can't move. But, but you're pumping things through me and I pulsate. My whole body's pulsating. It's like a, like ah, everything's pulsating ... Ooh. Even my eyes are pulsating.

N: Do you have any feelings towards this thing pumping through you, this metal part?

F: (Still softly and tired or rasping) It feels like a, like a robot with all kinds of lights going on and off. Sort of like a neon sign, just pulsating.

N: Are you the robot with the lights?

F: I feel like a robot with neon lights inside me, and these lights are all going on and off.

N: OK, let's look more into this theme. This is coming up since the very first scene: you perform an action in your dream in which you feel like your hand does something that you don't want to do, like a lever or something pulls you, something does something *through* you. You are pumped, now. You seem to experience yourself always, not as the agent of movement, but as something moved. So let us take this statement "I feel like a robot." I would like you to come back again to us, to the group, and do some repeating of this statement to other people. Tell some of us here "I feel like a robot," and watch your feelings as you say this. Or maybe start just where you are by saying it to nobody or to everybody. Stick to that statement "I feel like a robot," and see what feeling emerges; how relevant it is.

F: I feel like a robot ... (is still mumbling almost inaudible) ... with much activity inside ... I feel like a, like a robot. (Semi-closed eyes, as if listening intently to himself) There's a great deal of activity inside ... I feel like a robot ... and I don't like to feel like a robot ...

I'd rather move around. Don't like to be stiff. (Seems to move around during pause) I don't like to feel like a robot. (Sighs) I'd rather move around and I'd rather be flexible. (Still seems to be moving) Hmmm. That pump is really going inside; making me dizzy.

N: Could you let this pumping do something with your movements. Could you let tha...

F: Please?

N: Could let that pumping do something—guide you—let the pumping move you around instead of being contained in you.

F: I guess most of the parts are in my head. The iron band is gone. It's not there any more. It isn't there any more. It's (moving and sort of whispering so pretty inaudible) I feel so uncoordinated. It's just a, it's hot, too. It's real hot, too. It just goes through me like this, and I feel like I'm going to fall over.

N: Just let the pumping continue and ...

F: It just goes around and around.

N: ... more and more.

F: It goes like this; round and round through me here. Through me like this. (Shows) (whispering) Then my stomach gets on fire. My stomach is hot, too. (Sighs) ...

N: Is it increasing?

F: (Struggling) Oh yes. Oh. Oh.

N: Then go all the way.

F: (Whispers) Oh this fire is big. Oh it's, oh. Oh.

N: See if you can go on doing the same thing, letting the movement go on within, but stamp your feet a little while you do that. Keep moving.

F: (Very quietly) My stomach feels so heavy, like this. Pieces of lead in it or something that's heavy. And now that iron back is — the iron band is back on my head again.

N: Do you have any feeling of what the energy wants; where it wants to go?

F: The, the iron band seems to want to keep my brain from exploding. It, it's holding it.

N: Let it explode. I think you're safe.

F: The iron band's holding in tighter. Now it's coming. My whole face is becoming an iron mask. I'm scared.

N: Take sides with the energy. Imagine the energy can talk to the iron band. See if you can feel what the energy would like to say to the iron band.

F: Iron band, I don't like you holding me in like this. You're, you're constricting me ...

N: Put the strength of that energy in your voice when you say it.

F: I see a lot of purple lights. There are purple lights flashing all over the place ... purple lights ... lights ...

N: Try to merge more with the energy, just as if you were inside the (inaudible) ...

F: ... My body isn't right now. My arms won't go any more.

N: OK, let's see if we can serve as iron band for you. How would you feel if we hold you in so you try to literally break through us. My feeling would be to make a small circle around you so you can use all this energy in fighting us. We will be your iron band. (more around) Use all the energy that you can to break.

F: (Struggles and screams for around 20 sec., then calms down and repeats "Oh," many times, panting, occasionally intermingled with "Oh my God." This must go on for about a minute with more "Oh my God" at the end.) Oh, I am pumping now. (Chuckles from group) Ohh. Holy God. (Still panting) I didn't think he (or you) meant that much. Oh my God. Oh shit.