

Introduction

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Perhaps the time is now ripe when the mystic can break the glass through which he sees all things darkly, and the rationalist can break the glass through which he sees all things clearly, and both together can enter the kingdom of psychological reality.

—N. Brown, *Life Against Death*

MY OWN INTEREST IN THE TRANSPERSONAL began about nine years ago, around the time of my father's death. It was not long before this personal interest extended itself into my professional work as a classical Freudian analyst. Today, my practice embraces both the traditional and the transpersonal in a way most clearly reflected in the two chapters I have contributed to this collection.

At a meeting of transpersonal psychotherapists in San Francisco in 1976, I met Kathleen Speeth. Dr. Speeth had spent some of her childhood in Gurdjieff's home, and that exposure to transpersonal and mystic concepts provided a rich heritage for her professional life. As she moved from the transpersonal to the classical approach to psychology, I was moving in the other direction. The conversational bridge we built to connect these converging paths eventually led to this book.

We believed that many therapists in this country were practicing transpersonal therapy but that most of them were hidden from public and professional awareness—as was the field of transpersonal psychology itself. There was no easily available forum for the opening up of discussion in this area, so we examined ways of establishing one.

This collection, I hope, begins this process. Together, we collected the names of many authors and practitioners whom we knew to be working in this field, and asked other therapists to suggest potential contributors. Correspondence with one author sometimes led us to another, and thus the collection began to take form.

The ground rules suggested to potential authors were simple: first, we provided each contributor with our broad working definition of the transpersonal; second, we asked that the papers have a clinical orientation and contain illustrations of how the author actually applied transpersonal approaches to his or her clients' treatment. Apart from our explicit intent to

represent as many major Eastern and Western approaches as possible, we gave no other guidelines to the contributors, believing that maximum flexibility would facilitate maximum creativity.

Before the final manuscript was ready, Dr. Speeth regretfully had to withdraw from the project; unavoidable delays in publication had created a conflict with her other commitments. So it is that the book bears my name, and I must bear the responsibility for its final form.

This book, then, is a beginning attempt to build a literature to breach the current wall between the sacred and the psychotherapeutic. Recognition of the healing potential hidden in the sacred technologies of the great religious traditions, and particularly of Eastern practices, has been growing in recent years. In 1976, the Group for the Advancement of Psychiatry wrote a report of over one hundred pages entitled *Mysticism: Spiritual Quest or Psychic Disorder?* because it saw that "mysticism has become a significant force in our time" (GAP [Group for the Advancement of Psychiatry] 1976). That same year, *Newsweek* declared that at present there are four major forces in psychology: behavioral, psychoanalytic, humanistic, and transpersonal.

Attributing such importance to the transpersonal may be surprising to many psychiatrists and psychologists; it is an aspect of psychology that has relatively little formal literature and certainly no widely accepted definition.

Early transpersonal thinkers include William James, who systematically explored states of healthy and higher consciousness (James, 1961); Carl G. Jung, whose concept of individuation transcended the personal (Jung, 1933); Roberto Assagioli, who translated certain spiritual practices into workable psychotherapeutic tools (Assagioli, 1965); and Abraham Maslow, whose interest in self-actualizing people, their experiences, and values has exerted a powerful influence on postindustrial America (Maslow, 1968, 1971). Charles Tart, the parapsychologist, was a pioneer in collecting interpretations of human psychology by various spiritual traditions in his massive *Transpersonal Psychologies* (Tart, 1975 [new edition 1992]).

It is uncertain who first used the term *transpersonal psychology*. A. J. Sutich (1976) gave an interesting account of the development of the term, limited by what was known at the time he wrote. He quotes a letter from Abraham Maslow to Stanislav Grof:

The main reason I am writing is that in the course of our conversations we thought of using the word "transpersonal" instead of the clumsier word "transhumanistic" or "transhuman." The more I think of it, the more this word says what we are all trying to say, that is, beyond individuality, beyond the development of the individual person into something which is more inclusive than the individual person, or which is bigger than he is. What do you think? (p. 16)

Earlier references have come to light since, however. Ira Progoff used the term in his contribution to the 1955 Festschrift on Jung's eightieth birthday, later published (1956); Eric Neumann (1954) had used it the year before; and Dane Rudhyar had applied the word *transpersonal* to astrology back in the twenties. Perhaps yet earlier mentions will still be uncovered.

The *Journal of Transpersonal Psychology* began publication in 1969. Each issue contains this definition of the field: "Meta-needs, transpersonal process, values and states, unitive consciousness, peak experiences, ecstasy, mystical experience, being, essence, bliss, awe, wonder, transcendence of self, spirit, sacralization of everyday life, oneness, cosmic awareness, cosmic play, individual and species-wide synergy, the theories and practices of meditation, spiritual paths, compassion, transpersonal cooperation, transpersonal realization and actualization; and related concepts, experiences and activities." Despite its partial circularity, this definition indicates well the class of interests, experiences, and events gathered under the appellation of "transpersonal."

Those who practice psychotherapy within this general context can be considered transpersonal psychotherapists. One description of the field of transpersonal psychotherapy is provided by James Fadiman and Kathleen Speeth:

Transpersonal psychotherapy includes the full range of behavioral, emotional and intellectual disorders as in traditional psychotherapies, as well as uncovering and supporting strivings for full self-actualization. The end state of psychotherapy is not seen as successful adjustment to the prevailing culture but rather the daily experience of that state called liberation, enlightenment, individuation, certainty or gnosis according to various traditions. (in press)

From this perspective, transpersonal psychotherapy differs from the traditional approaches not so much in method or technique as in orientation and scope. There may be technical innovations such as meditation, visualization, and awareness training, borrowed from the spiritual traditions of the world, but the essential difference lies in the attitudes of the therapist, attitudes that shape the course of therapy. He neither avoids the issues of value and meaning in a human life nor places them outside the bounds of therapeutic work; rather he explores them, either as they arise in the working through of personal suffering or when their resolution frees the patient's energies for deeper confrontation with the dilemmas we all face.

Without the transpersonal perspective, traditional psychotherapy gives an implicit message of pessimism, which might be stated without too much exaggeration as, "Know thyself and adjust to the absurd!" The transpersonal ingredient alters this implication to "Know thyself, transcend defenses, transferences, projections, and even beliefs, and attain the station of one who

has outgrown the need for such childish things, as the great human beings of all times and places have done!" It might be added that this station involves the full realization of human possibilities; it is in no way connected with schizoid withdrawal, megalomaniacal delusions of grandeur, or flashy demonstrations of parapsychological prowess.

As more people in the West turn to meditation and other spiritual practices, and relationship with a spiritual teacher becomes less uncommon, the transpersonal psychotherapist must become adept in discriminating between the uses and abuses of extraordinary or at least extracultural experiences. Just because a technique may have a noble origin does not keep it safe from possible misuse by neurotic or psychotic trends in the personality. To see all spiritual practices as necessarily free of individual pathology is as blind a view as the rigidly orthodox position that all spiritual aspirations and practices are merely symptomatic.

An objective and experienced therapist needs to discriminate, to be willing to put down preconceptions in favor of looking at, listening to, and realizing what is actually happening in each particular circumstance. For example, meditation can put one in touch with a fine and essential part of oneself; it can also be used to rationalize compulsive withdrawal in a family power struggle, or symbolically to blot out a hated world. The relationship to guru or guide can be a lifesaving reorientation; it can also be distorted with transference gratifications. Altered states of consciousness—easily produced with concentration and breathing practices—may help free a person from constricting linguistic schema; or they may feed paranoid ideation, accentuate schizoid trends, and act generally in the service of resistance. And the initial glow and romanticism of inexperienced meditators may be just what is needed to allow for the modification of destructive habits; or it may be used to avoid the here and now of life's problems, including therapeutic transference reaction.

In working on such areas as anxiety, depression, sense of identity, and reality testing, traditional psychotherapy attempts to strengthen the ego so that it can endure the eventual weaning from unreality that human maturity requires. Although meditation or other specifically transpersonal practices used alone might eventually unravel a modern anxiety neurosis or depression, therapeutic techniques are more specifically designed for the usual people and settings with which therapists work. The therapist can greatly hasten transpersonal processes by first using ordinary methods to bring into the patient's consciousness what has been repressed. For example, beneath a depression, a patient may be unconsciously clinging to the idea that his childhood mother should "make up" to him all his previous deprivations. By working with transferences in the traditional fashion, the therapist can help the patient bring to the surface this area and all the feelings it involves. It might then be appropriate for the experienced therapist to offer certain meditative techniques to facilitate the letting go of the ideas and feelings.

But how is the therapist to gain experience? In the two decades since Norman Brown suggested that the mystics and rationalists among us (and within us) might come to an understanding, many psychotherapists of widely differing theoretical persuasions have been tentatively exploring the common ground where this uncommon realization might take place. A rather large body of unshared experience has developed, the communication of which is likely to cross-pollinate and enrich us all. It is to provide a measure of vicarious experience and to support the formation of a community of like-minded individuals within the helping professions that I have undertaken this collection of papers.

The contributions are remarkably diverse. They reflect a spectrum of perspectives—from the tough-minded, precise extrapolations from behavioristic methodology of Les Fehmi and Fern Selzer, through the creative clinical pharmacology and theory development of Stanislav Grof, to the tender empathy of Norman Don. Not all of the papers represent my own orientation. Each, however, is a potentially valuable stimulus to other therapists.

There are possible dangers in working with the spiritual and psychological domains simultaneously. Can therapists be adequately competent in both areas, sufficiently certain to avoid the pitfalls of their own counter-transference traps and spiritual biases? Can therapists work in areas beyond those to which they have personally progressed? Many classical therapists who are atheists or agnostics implicitly endorse their own belief systems by the kind of attention they give to the religious aspirations of their clients. Will transpersonally oriented therapists be guilty of the same kind of suggestion, albeit in the opposite direction? What are the implications of prescribing meditation practices or other techniques derived from spiritual traditions as adjuncts to treatment?

Clearly, the practice of transpersonal psychotherapy requires the very best of which the therapist is capable: experiential knowledge rather than opinion; attention instead of preconception; certainty in place of theory. The papers presented here are like the experiences of the elephant in the dark in the old Sufi fable: one man feels the tail and declares that the elephant is like a rope; the next feels the ear and exclaims that the elephant is like a palm leaf; the third grabs the trunk and yells that the elephant is like a snake; and the fourth runs his hand over the hide and protests that the elephant is like the bark of the tree (Shah, 1971b). The synthesis of many opinions into a fuller picture is the perennial task of each human mind and one of the marks of psychological awakening.

The ultimate goal of the spiritual quest is the experience of oneness with the universe. As Ken Wilber points out in *The Spectrum of Consciousness*, humanity's task is to remember or become aware of those aspects of itself which it has forgotten or repressed (1977). Thus, different parts of the spectrum are remembered or made available by different approaches. For example,

the psychoanalytic approach will permit one to remember and accept as part of oneself that which has been repressed in the unconscious; certain body approaches such as Reichian therapy, bioenergetics, and Rolfing permit one to become aware of certain aspects of the body that may have been repressed or made unconscious. Other aspects of the unconscious are elicited in Jungian work where certain archetypes and aspects of the shadow can be owned or remembered. Various kinds of work can be done on the subtle energy fields, and these, too, can become part of our awareness. Finally, through various meditational or contemplative approaches, direct awareness of unity with the rest of the universe can also be achieved.

As you read the following papers, it might be well to keep in mind what the Buddha said in the Kalamas Sutra:

Do not believe in what you have heard; do not believe in traditions because they have been handed down for many generations; do not believe anything because it is rumored and spoken of by many; do not believe merely because the written statement of some old sage is produced; do not believe in conjectures; do not believe merely in the authority of your teachers and elders. After observation and analysis, when it agrees with reason and it is conducive to the good and benefit of one and all, then accept it and live up to it.