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Transpersonal Psychology and Psychotherapy: A Relational Inquiry

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TRANSPERSONAL PSYCHOLOGY AND PSYCHOTHERAPY:
A RELATIONAL INQUIRY

Robert Allen Geller, B.S.



A Digest Presented to the Faculty of the Graduate
School of the Lindenwood College in Partial
Fulfillment of the Requirements for the
Degree of Master of Art

1985

Digest

This study attempts to determine, through re-search of the literature of transpersonal psychology, if a specific paradigm for psychotherapy is present in that literature.

The research is viewed from a theme analysis perspective which attempts to isolate the major characteristics of the descriptions circumscribing transpersonal psychotherapy that emerged consistently. Certain consistent patterns did, in fact, emerge.

The articles are considered against a background that includes the historical appearance of the transpersonal movement, the influence of Eastern traditions, a transpersonal model of the person, and various conceptualizations of therapy, transformation, and ultimate liberation.

An appendix is included consisting of reviews of therapy-related articles that appeared in The Journal of Transpersonal Psychology from its inception in 1969 through 1984.

The study concludes that although a "transpersonal condition" may exist in therapy under certain circumstances, no evidence appeared to confirm the

existence of a discrete and generally applicable psychotherapeutic paradigm as the term is defined at the outset of this thesis.

TRANSPERSONAL PSYCHOLOGY AND PSYCHOTHERAPY:
A RELATIONAL INQUIRY

Robert Allen Geller, B.S.

A Culminating Project Presented to the Faculty of the
Graduate School of the Lindenwood College in
Partial Fulfillment of the Requirements for the
Degree of Master of Art

1985

This work is dedicated to that
which is inside, throughout, behind,
in front of, beside, above and below
everything in the universe.

This work is dedicated to that
which is invisible, all-pervasive,
unutterable, infinite and at one with
everything.

COMMITTEE IN CHARGE OF CANDIDACY:

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Introduction

In the recently produced and relatively limited literature of the transpersonal psychology movement, there is reference made from time to time to something called "transpersonal psychotherapy."

The origins of and connections among the statements regarding transpersonal psychotherapy are not clearly apparent and usually obscure. In reviewing these apparently discrete and isolated writings about transpersonal psychotherapy, there emerges, under scrutiny, a nexus of character and context, including strong influence by Eastern spiritual and religious disciplines. Other relationships are felt clearly, if not sharply, among the writings.

This character that pervades the area of transpersonal psychology referred to as transpersonal psychotherapy has not been investigated adequately or holistically. I use the term "holistically" here in the sense of a functional relationship between the parts and the whole, the parts in this case being articles on the subject of transpersonal psychotherapy

and the whole being the thing that is transpersonal psychotherapy if, in fact, such a discipline exists.

The investigation of this character or nexus, the subject of this work, leads to the research question central to this thesis. This study will endeavor to determine if a clear paradigm for a psychotherapy exists or is implied in the psychotherapy-related segment of the transpersonal psychology literature.

Chapter I: Scope and Significance of the Study

Scope

This work will look into the recently emerged transpersonal psychology movement in its various aspects. It will be viewed in terms of its historicity, its philosophical viewpoint, its position in relation to conventional psychologies, the influence of Eastern spiritual disciplines upon it, and, most pertinent to this paper, its views about psychotherapy.

In order for the transpersonal writings and conceptualizations of psychotherapy to be viewed against an appropriately illuminated background, I will first give the reader an overview of those elements of the transpersonal psychology movement that is necessary to a discussion of the existence or non-existence of something called transpersonal psychotherapy.

A discussion of the historical roots of transpersonal psychology in the humanistic psychology movement is followed by an examination of the influence of Eastern disciplines upon transpersonal psychology

concepts, a key element in transpersonal thinking and attitudes toward psychotherapy.

A discussion of the transpersonal model of the person, equivalent to personality theory in traditional psychologies, involves transpersonal focus on consciousness itself, the effects of conditioning, their concept of personality, and the importance of identification.

Various conceptualizations of transpersonal psychotherapy are reviewed from the standpoint of context and content and process in the therapy setting, concepts of positive outcome in therapy, levels of therapeutic growth and the transpersonal idea of transcendence. Transpersonal psychotherapy is compared with traditional therapies.

Factors that consistently occur in discussions of transpersonal psychotherapy are examined to determine if a true paradigm for a specifically transpersonal psychotherapy exists, either explicitly or implicitly. The evidence in the literature for such findings is given in the summary and concluding sections of the paper.

Notes on 26 articles on psychotherapy that appeared in The Journal of Transpersonal Psychology between its inception in 1969 and 1984 are presented

in Appendix A.

Broader readings. At the outset of this work, I did considerable reading in the broader area of the origins of psychology in philosophy and religion because of my personal interest in that subject.

In addition, study was done on the emergence, in this century, of phenomenology and phenomenological psychology, existential psychology, and the humanistic psychology movement. A sense of the conceptual interrelationships and historical emergence of these psychologies helped to establish for me a sense of place and causal stimulus for the first transpersonal ideas.

Readings in current research in psychotherapy as exemplified by Gurman and Razin (1977) allowed me to maintain a reference relative to conventional psychotherapy against which the various aspects of transpersonal psychotherapy could be viewed.

Significance of the Study

The essence of this study is an examination of the literature of the transpersonal psychology movement, especially those parts that refer to psychotherapy, to determine if a specific system for psychotherapy that can be considered exclusively "transpersonal" is presented.

The transpersonal writings on therapy lack clear

origins, and connections among the various statements and to the traditional psychological literature are often not apparent.

From an examination of these seemingly discrete writings, there emerged a nexus of character and context, including consistent relationships to certain Eastern spiritual disciplines and mystical traditions. Other relationships in the literature were also found.

The value of this work is the examination of the transpersonal literature on therapy itself, with an aim toward the discovery of clear consistencies in concepts and attitudes. If such consistencies are found, the object of this work will be to determine if they represent something that we may call "transpersonal psychotherapy," or if we are looking at that which is simply a transpersonal way of thinking about psychotherapy.

Even if the latter is the case, I hope that an examination of transpersonal ideas about therapy will provide the reader with a greater understanding of the transpersonal psychology movement and its conceptualization of psychotherapy.

We know there is something called the transpersonal psychology movement. This paper asks simply, "Is there something that can be named transpersonal

psychotherapy?"

The Research Question

The research upon which this work is based addresses itself to the question, "Does a specific paradigm for psychotherapy exist in the literature of transpersonal psychology?" If such a structure for psychotherapy does exist, several alternate possibilities suggest themselves.

1. Are there specific psychotherapy techniques being presented as unique to transpersonal psychotherapy?
2. Are specific therapeutic techniques described in the transpersonal literature derived from other psychotherapy modalities, forming a new gestalt or conceptualization of therapy that is unique in the transpersonal context?
3. Is there a collective inference in the transpersonal literature? That is, even though no self-contained or systematic structure for therapy has been explicitly presented, have certain techniques and applications from existing therapeutic disciplines been found to be congruent with the philosophy and goals of transpersonal psychology?

4. Does the literature of transpersonal psychology attempt to present or imply a paradigm for psychotherapy? Or do the writings, at this time, simply constitute a philosophical statement relating to a way of viewing human consciousness with its concomitant implication of a "psychology"?

This last possibility bears on Thomas Kuhn's (1962) discussion of the nature of the development of scientific paradigms and C. G. Mueller's (1979) concern with the sometimes vague relationships between psychology and philosophy. Both views will be addressed in more detail in the concluding section of this work.

There is only one research question being investigated here. If any of the alternate possibilities are borne out in the course of this research, so be it. The reason for this investigation remains to discover if there is, in fact, a particular form of psychotherapy that, on its own ground, can be called transpersonal psychotherapy.

Definition of Terms

In order for the research question to be understood to mean at least approximately what I intended it to mean, a definition of terms seems appropriate.

Specific: This word is used in its sense of

embodying a characteristic quality or trait.

Paradigm: I use this word in the sense that Kuhn (1962) used it, as an agreed-upon central idea under which a particular field of science conducts its research, formulates its problems and, in the case of transpersonal psychology, applies its concepts of therapy and educates those coming into the field.

Psychotherapy: It is essential, in my view, that the meaning of the word "psychotherapy" be understood in its most simple terms. I will use part of the definition given in the Dictionary of Psychology (Chaplin, 1975, p. 432): "The application of specialized techniques to the treatment of mental disorders or to the problems of everyday adjustment." The word "therapy" will be used interchangeably with "psychotherapy" throughout the paper.

Transpersonal psychology: The term is used here in reference to the recent historical movement in psychology that grew out of the humanistic psychology movement in the late 1960's.

Literature: The term literature, as I use it here, alludes to the brief literature of the transpersonal psychology movement, beginning in the late 1960's with the publication of The Journal of Transpersonal Psychology in 1969. The literature also includes a

number of edited documents or papers on transpersonal psychology and related material.

Research Methodology

The recent and relatively brief literature of the transpersonal psychology movement is contained in several documents, consisting of edited papers and monographs, and in The Journal of Transpersonal Psychology, the single periodical of the Association for Transpersonal Psychology and the only journal dealing exclusively with the subject of transpersonal psychology published in the United States. For purposes of brevity, The Journal of Transpersonal Psychology will occasionally be referred to as the Journal throughout this work.

Although editorial discrimination and taste no doubt bias the selection of articles for the Journal, I will assume that it is an authentic representation of the interests and perspective of transpersonal psychology because it is the only journal published by the transpersonal psychology movement.

Review Technique

A systematic review of the Journal from its inception in 1969 through Volume I, 1984, enabled me to isolate articles related to 17 separate subject areas.

The object of this segmenting is the isolation of articles on psychotherapy. Articles on the more general subject of transpersonal psychology were also isolated and reviewed for content as related to transpersonal psychotherapy. My use of the term "transpersonal psychotherapy" throughout this paper reflects the use of the term by various authors under review and is in no way meant to infer that I have "answered" the research question by finding that there exists a discrete system of psychotherapy called "transpersonal." The term is used simply as a semantic convenience by which I may refer to the subject at hand.

The edited documents mentioned above supplied the broader conceptual base for both transpersonal psychology in general and transpersonal psychotherapy, in contrast to the narrower focus of most of the Journal articles, as will become obvious as the paper unfolds. A review of the Journal articles pertinent to this work appears as Appendix A.

Content Analysis Perspective

A comprehensive explanation of the subject of content analysis is beyond the scope of this paper. Briefly, the method consists of a variety of techniques used to sift through large quantities of data to establish, in a quantitatively verifiable way,

what is actually being said. In the case of this paper, the messages are the articles about transpersonal psychotherapy.

Holsti (1969) describes content analysis as a "technique for making inferences by objectively and systematically identifying specified characteristics of messages" (p. 14).

Although content analysis was originally used to study large amounts of data over long periods of time, such as tracking certain types of newspaper stories, it has been used in qualitative studies, particularly in the social sciences (Carney, 1972; Gerbner, Holsti, Krippendorff, Paisley & Stone, 1969).

Because of the general nature of this study and the small amount of data available, this work does not lend itself to a traditional content analysis, either quantitative or qualitative.

There are, however, content analysis perspectives, as suggested above, that provide a useful way of organizing the material under study. One such perspective is theme analysis, whereby a particular theme itself is considered as a unit of analysis and an accumulation of such themes is placed in a larger category (Carney, 1972, p. 301). An example is a number of attributes or themes which are placed in a larger cate-

gory called "dropping attachment to ego and personality." In this case, a single "score" is given to an article that characterizes a pre-stated theme that one is "watching for" in the literature.

Contingency analysis. Another aspect of content analysis from which the transpersonal literature will be viewed is that of contingency analysis. Contingency analysis is based upon the simple presence or absence of an attribute in the material being examined without regard to frequency. Inferences are then considered dependent upon the proximity of two or more content attributes in the context of material that relates to the research question (Holsti, 1969, p. 7).

Since the abundance of documentation necessary for a formalized content analysis in which results can be construct validated or sampled for validity does not exist, this study will use analysis based conceptually on a thematic and contingency format in searching for themes and attributes that may indicate that something called transpersonal psychotherapy is being represented.

Chapter II: The Emergence of The Transpersonal Perspective

In the early 1960's, humanistic psychology emerged in reaction to behaviorism, which Maslow referred to as "mechanomorphic psychology" modeled after the natural sciences (1969, p. 5). Maslow, like others before him, was troubled by what he perceived as the problems of a value-free science operating in psychology.

Growing numbers of mental health professionals, particularly psychotherapists and clinical psychologists, had become dissatisfied with the reductionistic approach of behaviorism and the narrowly pathological derivation of the psychoanalytical approach. In response to these concerns, humanistic psychology focused on areas that were singularly human and phenomenological, what James named "The rich affective life that underlies man's essential humanity (Misiak & Sexton, 1973, p. 109). The humanistic interest was associated with health rather than pathology.

Maslow (1971) and others initiated studies of

healthy individuals, focusing on self-actualization and those who had progressed farthest in that dimension. Their view of persons avoided reductionism and mechanistic terminology (Rogers, 1961; Misiak & Sexton, 1973). Further, the humanistic movement explored ways in which the drive toward self-actualization could be encouraged in individuals, groups, and organizations (Walsh & Vaughan, 1980).

Toward the end of his life, Maslow, along with Anthony Sutich, editor of the Journal of Humanistic Psychology, called attention to levels of human potential beyond self-actualization, wherein the individual could transcend the ordinary, assumed limits of personality and experience. In 1968, a year before the initial edition of The Journal of Transpersonal Psychology, Maslow concluded that humanistic psychology was a transitional phase:

A preparation for a still higher fourth psychology [humanistic psychology was sometimes called the "third force," following psychoanalysis and behavioral psychology] transpersonal, transhuman, centered in the cosmos rather than in human needs and interests, going beyond humanness, identity, self-actualization, and the like. (Maslow, 1968, p. 47)

Limitations of the Humanistic Model

The emerging transpersonal model thus pointed toward potential areas of human experience, primarily

modes of transformation and transcendence, beyond the conventional views of psychoanalysis, behaviorism, and even humanistic psychology. In an article in the Journal (1971, 1), Green and Green point to a core point of separation between the humanistic and transpersonal concepts. That point is the experience of transcendence which is central to the idea of transpersonal psychology. The Greens draw an interesting analogue between Maslow's concept of a non-transcending and transcending self-actualization and Assagioli's distinction between a personal and spiritual psychosynthesis (Assagioli is the founder of the psychosynthesis technique of therapy). The common denominator in the two concepts is the transcendence of personality and ego.

Maslow's conception of self-actualization took the individual to the highest aspects of self-development as a personality and creative force. He and others finally realized, however, that persons could transcend the boundaries of self and self-concerns. Maslow's investigations into peak experiences led him into the area of Eastern traditional yogic practices whose goals were the dropping of ego in preparation for enlightenment.

In the late 1960's, Anthony Sutich, Abraham Mas-

low, Stanislov Grof and Victor Frankl and Jim Fadiman began to share their perceptions of humanistic psychology in relation to the Eastern traditions. After extensive discussion and correspondence, Maslow and Sutich agreed that the term "transpersonal" would be descriptive of the new aspect of psychology and in 1969, Sutich produced the first issue of The Journal of Transpersonal Psychology.

The Journal continues to publish original theoretical and empirical work that, as Vaughan suggests, would "probably not be published by mainstream journals." Also, the Journal builds "upon what has been done before" both in the areas of "Western psychology and Eastern mysticism" (Grof, 1984, p. 27).

The Meaning of Transpersonal Psychology

According to Vaughan (in Grof, 1984), the transpersonal movement attempts to expand the field of psychological inquiry to include the spiritual aspects of human lives. The term "transpersonal" means "beyond the personal" or "beyond the personality" (p. 26). Seen in this context, who and what we are is not limited to the personality or ego, and it is made clear that when we identify with the body, ego or personality, we have a limited view of ourselves. The transpersonal concept seeks an integration of inner and

outer experience, realizing that these are simply two aspects of a mutually interdependent reality.

The Transpersonal view and religions. The transpersonal view recognizes the transcendental, mystical unity of all religions, which in turn recognize that the source of wisdom and enlightenment lies within oneself. In Christianity, the kingdom of God is within; in Buddhism, enlightenment is the discovery of ever-present Buddha Nature. In Hinduism, the inner search is for the Atman. In transpersonal terms, the part of an individual that can come in contact with the perennial wisdom is called the transpersonal self. The term perennial is used here in reference to that transcendent enlightenment spoken of by Huxley (1945) to mean the absolute enlightenment that cuts across time and religious disciplines.

The transpersonal purpose is, in part, to facilitate the higher potentials of human beings. It sees the growth toward wholeness as growth beyond ego. It does not intend transcendence instead of ego, but views ego development as a stage along the way toward liberation. Vaughan sees the healthy use of adult ego development as the "midpoint on the great chain of being." From our identification with ego and its concomitant

alienation, we move into a transpersonal awareness outside the boundaries of ego development. In the new transpersonal orientation we find that we are not only shaped by our environment, but, in turn, shape it (Grof, 1984, p. 28).

Goleman (1971) defines transpersonal psychology rather succinctly:

Transpersonal psychology might be defined therefore as the psychology of ultimate or highest meanings and values, and psychologists who explore in this area must be prepared to examine all institutions and activities from the point of view of such meanings and values. (p. 42)

Vaughan posits that the transpersonal purpose is, at least in part, to recognize the mind as one of our "great inexhaustible resources" and attempt to understand the transformational process so that it can be contacted and facilitated (Grof, 1984, p. 27).

The connection with Eastern disciplines. Fadiman points to an interesting transitional period that brought people of different orientations together and clarifies the reason for the initial movement toward Eastern yogic, or spiritual disciplines (Walsh & Vaughan, 1980).

Walsh had pointed out that the transpersonal movement had no charismatic leaders but grew from networking, drawing to it those with a common vision for hu-

manity. She described the movement as "an organic interrelated form of working in which considerable emphasis is placed on self-determinism, self actualization and self transcendence" (in Grof, 1984, p. 26).

Fadiman added to this that those who have had a common set of experiences with non-ordinary states of consciousness felt a need to find a body of supporting literature that would "clarify, codify, interpret and resolve the questions raised by what were emotionally important yet unfamiliar occurrences (Walsh & Vaughan, 1980, p. 175).

To these people, mainstream psychology seemed barren, with the exception of James and Jung. In their search for meaning, the writings of the "older psychologies" (Eastern disciplines) were encountered. As these writings were assimilated, various possibilities were seen for connections between traditional Eastern ideas and Western psychology. Fadiman noted that transpersonal psychologists drew heavily on psychological literature outside the American mainstream. Examples of the ideas influencing transpersonal therapists include writings from Buddhism, Sufism and Yoga. (Since all are formally yogic disciplines, I assume that Fadiman by use of this term alludes to vedantic literature.)

Fadiman notes that in the yogic traditions, there is the clear suggestion that if one works to clarify the content of one's consciousness, changes in one's relation to the external world will occur. Therapeutic progress proceeds not from confrontation or substitution, but from dropping attachment to the neurotic aspects of one's life. Fadiman points out that

Inappropriate habits and excessive desires seem to fade away as a person finds them to be less satisfying than the more transpersonal experiences. (Walsh & Vaugh, 1980, p. 176)

To express the limitations of Western thought, he quotes Jung:

Western consciousness is by no means consciousness in general, but rather a historically conditioned and geographically limited factor, representing only one part of humanity. (source not cited)

The influence of Eastern spiritual traditions on transpersonal psychology will be discussed at greater length in the next section.

Recent Antecedents to Interest in Eastern Disciplines

Misiak and Sexton (1973) point out that existential psychology with its focus on the meaning of human presence in the world came into being in response to the shortcomings of Western philosophy, which had "bypassed man's emotions and the burning issues of the meaning of life, suffering and death" (p. 81).

The authors note that such a phenomenon may partly be the result of "certain conflicts and anxieties" that have arisen in the West in the past century. No doubt these are related to the current materialism and mechanistic attitudes toward human beings in Western society.

These conflicts and anxieties are also believed to account for the upsurge in the Western world of interest in certain oriental philosophical and religious systems such as Tao and Zen Buddhism. Misiak and Sexton theorize that

Western man finds or hopes to find either in oriental (Eastern) movements or in existentialism, ideas and answers which could give him understanding of himself, and make it possible for him to understand the meaning of life. (p. 81)

Another explanation for the transpersonal movement's openness to the assimilation of Eastern traditions is a natural extension of Maslow's feeling, mentioned before, that the humanistic ideal of self-actualization was limited by its ego-bound aspects. It is based upon the humanistic position that human beings have a natural need and desire for transcendence and fulfillment of their essential spiritual nature (Maslow, 1971). Since the advent of our industrialized technological society and the accompanying replacement of the religious and philosophical with scientific

ideals, it is postulated that our natural desire for a return to our more spiritual aspects has grown stronger, and for that reason we are attracted to the Eastern concepts of potential enlightenment.

The terms Eastern disciplines, consciousness disciplines, Eastern traditions, and mystical traditions are used interchangeably in this paper. They may be defined as Eastern religious doctrines and practices that describe and infer the possibility of obtaining, through meditative practices, profound insight into reality, mental processes and consciousness itself.

In regard to the interest in Eastern disciplines on the part of the transpersonal psychology movement, Walsh and Vaughan (1980) posit that the one-sided and dualistic paradigms of science and technology coupled with the current materialism precipitated the willingness to examine Eastern traditional beliefs. This willingness was no doubt further stimulated by the personality-bound aspects of the humanistic movement that met its limits in the ideas of self-actualization.

Goleman (Walsh & Vaughan, 1980) suggests that the cultural limitations of traditional Western psychology paradigms were sharply felt as a result of exposure to Eastern beliefs regarding the nature of reality and consciousness (Boorstein, 1980; Grof, 1984; Tart, 1975; Wilber, 1979).

Transpersonal Psychology and Eastern Traditions.

Eastern spiritual disciplines are a key component of the conceptual base of transpersonal psychology, as well as the yogic practices, primarily meditation, associated with the disciplines. These traditions are associated primarily with Eastern religions such as Buddhism and Hinduism. The transpersonal movement does not view these practices in an Eastern religious sense, but as methods individuals may employ in order to obtain insight into self and reality, separate from specific religious doctrines and dogma. The practices may, paradoxically, have the effect of enhancing the religious understanding of the individual using them (Walsh & Vaughan, 1980).

The transpersonal psychology movement's focus on Eastern spiritual traditions is central to the movement's views on consciousness, transformation and transcendence of the individual.

Transpersonal therapy concepts, discussed later in this paper, are better understood against this background of acceptance and incorporation of the basic tenets of the Eastern consciousness disciplines by the transpersonal movement (Walsh, Elgin, Vaughan & Wilber, 1980). Most of these traditions view consciousness as their primary interest, with beliefs that run contrary to those of Western psychology and philosophy (Tart, 1975).

Essentially, the Eastern traditions hold that (a) our ordinary state of consciousness is severely limited, (b) that other states, including transcendent or "higher" states, exist, (c) that these higher states are attainable through training, and (d) that verbal communication regarding these states is all but impossible.

Also held by the consciousness disciplines is the belief that our normal or everyday state of consciousness is dreamlike and illusory, and that attachment to the continuous inner fantasy dialogue that manifests as our egos is a constantly self-enforcing distortion of our perception of reality. We cannot recognize our emergence in this state until we begin to examine our cognitive and concept-forming processes in a disciplined regimen of yoga such as meditation.

The normal state of affairs, then, according to the Eastern disciplines, is considered as asleep or dreaming, unrecognized because the vast majority of individuals share, consensually, the same condition of consciousness.

Disidentification with the dream state. When an individual, through a spiritual practice such as meditation, disidentifies with or becomes permanently non-attached to the dream state, he or she is said to be

liberated, awakened or enlightened and can know through direct intuitive experience the true nature of reality as well as the nature of his previous state.

This liberation is the ultimate goal of the consciousness disciplines. In the Zen Buddhist Bodhisattva tradition, for example, the final aim of the Bodhisattva (i.e., one who has rejected nirvana to remain behind to help all sentient beings), is the liberation of all sentient beings (Watts, 1957; Suzuki, 1980).

In one sense, the idea of reality distortion is an extension rather than a refutation of Western experimental psychology, in which a broad range of perceptual distortion is apparent among subjects in a broad range of experimental paradigms.

The Eastern disciplines posit that without remedial practices such as meditation, we share distortive illusions in the form of our just-mentioned consensual reality. From this traditional perspective, one transpersonal view holds that our normal everyday state fits the Western definition of psychosis in that it is suboptimal cognitively, distortive of reality, and unrecognized by the subject (Vaughan & Walsh, 1980).

Chapter III: Broader Conceptualizations
Of Transpersonal Psychology

A Transpersonal Model of the Person

One of the most comprehensive articles on the transpersonal view of the person is that by Walsh and Vaughan (Walsh & Vaughan in Boorstein, 1980). Although its conceptual origins are not made clear, it does incorporate the transpersonal perspective of Eastern disciplines described in the last section of this work.

A brief explanation of this transpersonal model of the person should facilitate understanding of the discussion of transpersonal psychotherapy that follows.

Basic structure. The structure of the transpersonal model of the person falls into four major categories. They are consciousness, conditioning, personality, and identification.

Consciousness. Walsh and Vaughan view consciousness itself as a central element of the transpersonal model. Self-reflected or introspective consciousness

is seen as the very essence of being human. Traditional Western psychology holds a range of different views--from behaviorism, which ignores consciousness almost totally, to humanistic approaches that acknowledge consciousness but are more concerned with its contents than with consciousness itself.

The transpersonal view of consciousness. The transpersonal model views ordinary consciousness as a state of reduced awareness which is mediated by psychological defenses. The everyday state of consciousness, according to Walsh and Vaughan, is imbued with a continuous flow of fantasies that exert a powerful influence on our perceptions, cognitions and behavior. This idea is equivalent to James' "stream of consciousness" (James, 1983, p. 219). This state is also akin to the Eastern, particularly Buddhist, concept of living in a state of attachment and illusion (Ross, 1980).

When we engage in prolonged and regular self-observation as in meditation, it becomes clear that everyday experience is perceptually distorted by a continuous, automatic and unconscious combination of stimuli. These stimuli derive from both reality and fantasy according to our needs, defenses, and expectations.

Optimum consciousness is viewed as being more

comprehensive than everyday consciousness, potentially available at any time if the defenses can be relaxed. One aspect of growth, then, from a transpersonal perspective, is seen as the letting go of defensive contractions, thus removing obstacles to the ever-present potential. This "letting go" is achieved by quieting the mind and eliminating the perceptual distortion imposed by fantasies (Boorstein, 1980, p. 15). This quote from an Eastern writer is clarifying:

The fundamental task which gives the key to many realizations is the silence of the mind. . . . All kinds of discoveries are made in truth when the mental machinery stops, and the first is that if the power to think is a remarkable gift, the power not to think is even more. (Aurobindo in Satprem, 1968, quoted in Boorstein, 1980, p. 15)

Traditional Western psychology differs from the transpersonal view of consciousness in positing that the everyday level of consciousness is maximal. Tart (1975) notes that the Western assumption is simply that individuals are conscious and all human beings are presumed to be conscious in that they sense things. That is, they are aware of their discrete identities as they sense and may think about their perceptions and exercise volition.

The Eastern traditional position, as reflected by Walsh and Vaughan and Tart, is that the state we call

ordinary consciousness does not possess the properties that we ascribe to consciousness at all. These properties include being aware of oneself as well as incoming stimuli and exercising control over our response to the stimuli. The spiritual disciplines describe our ordinary state of consciousness as dominated by illusion and daydreaming, stressing also that real consciousness is possible.

The transpersonal model restates, without modification, this Eastern concept. I have repeated it several times in this work without reservation, as it is an essential element in transpersonal psychology and therapy concepts.

A spectrum of conscious states. Transpersonal theorists argue that a broad spectrum of conscious states exist (Grof, 1972; Tart, 1975; Wilber, 1979). Some are seen as useful or potentially useful, in a state-specific sense (Tart, 1975). Others are seen as higher states of consciousness, in Tart's sense of possessing all the characteristics of the previous states of consciousness with added attributes. A wide range of literature from a number of cultures and disciplines point to the attainability of higher states of consciousness (Aurobindo, 1953; Blofeld, 1978; Bucke, 1982; Castaneda, 1974; Conze, 1959;

Dass, 1977; Govinda, 1970; Hui-Neng, 1963; Kapleau, 1966).

The Western view, in addition to acknowledging only a limited number of conscious states such as waking, sleeping dreaming, and intoxication, finds further that all altered or meditative states are detrimental or psychotic, and normality is considered optimal. (See editor's footnote #7, p. 187, in Gurman and Razin for a good discussion of "normal" and confusion of social adaptation with mental health.)

Conditioning. The transpersonal view of normality is that people are more ensnared and trapped than they are aware, but that experiential freedom from that condition is possible (Goleman, 1977).

One form of conditioning is attachment, a condition largely ignored in the West but a key concept in Buddhism and other Eastern disciplines (Ross, 1980). Attachment is closely related to desire. When attachment exists, non-fulfillment of desire will result in pain. In this context, attachment plays a key role in the cause of suffering. Conversely, letting go of attachment is central to the cessation of suffering.

Personality. The areas of personality development and personality hold a key position in most of the schools of psychology. Most psychological theor-

ies contend that man is one in the same thing with his personality. Well-being is viewed as a healthy personality or ego. A brief look at any undergraduate psychology text will confirm this.

Transpersonal psychology offers a less important position to personality, seeing it as only one aspect of being--an aspect with which an individual may identify, but does not have to. Ultimate health is seen primarily as a disidentification and disengagement with personality and ego rather than a modification of it (Walsh & Vaughan in Boorstein, 1980, p. 16).

With reference to transpersonal ideas regarding psychotherapy, discussed in the next section, several writers acknowledge interest in "traditional areas and concerns" (Walsh & Vaughan, 1980, p. 16), including conventional ego questions. These traditional concerns are subsumed, however, in an expanded model of therapy that includes an interest in promoting awareness and identity beyond conventionally recognized limits of mental health. Owens refers to transpersonal psychology as "growth psychology," a reference to its aspects of self-realization (Tart, 1975, p. 155).

Identification. Conventional Western psychologies have defined identification as an unconscious process in which the individual becomes like or feels like some-

one or something else (Brenner, 1974, p. 41). Transpersonal psychology, while recognizing external identification, posits that identification with intrapsychic (internal) phenomena and processes is more significant. Identification is seen as fundamental and is conceptualized in the transpersonal model beyond traditional Western descriptions.

Transpersonal thinking contends that we are all so involved in this type of internal identification that it goes unrecognized by most of us, including psychologists and psychotherapists. Attempts to question consensually validated identifications often meet with considerable resistance (Brenner, 1974). Ronald Laing, the British psychiatrist, states in this regard:

Attempts to wake up before our time are often punished, especially by those who love us most. Because they, bless them, are asleep. They think anyone who wakes up, or . . . realizes that what is taken to be real is a dream, is going crazy.
(Boorstein, 1980, p. 17)

There are far-reaching implications in the transpersonal model of identification, according to Walsh and Vaughan (Walsh & Vaughan in Boorstein, 1980). When one identifies strongly with mental content, one is rendered unaware of the more active processes of consciousness itself from which the content has emerged.

When an individual identifies with content, the content is falsely identified as context. The person then interprets subsequent cognitive events within this false context and thus develops ideas about reality and logic from which one becomes further and further removed. In other words, content becomes identified as context and elicits other content in a way that is congruent with and reinforces the new context.

If, for example, the thought "I'm scared" arises and is observed to be just another thought, it can have little influence. If, however, we identify with it and do become scared, a whole series of fearful thoughts may arise and be identified with. Neutral feelings can thus be interpreted as fear.

It may be, suggest Walsh and Vaughan (1980), that thoughts and beliefs mediate, delineate and support both the identification and constriction of consciousness, and serve as limiting models of who we think we are. Thoughts and beliefs must, as such, be opened to reevaluation and ultimately be transcended for us to experience transformation and growth. Walsh and Vaughan speculate that such identifications with thoughts and beliefs may be adopted as "strategic defensive positions" about who and what we must be in order to survive and function in the world (Walsh & Vaughan in Boor-

stein, 1980, p. 17).

Finally, for the person who has dropped all identifications, there is no dichotomy of me and not-me. Such a person would probably identify with everything and nothing. The process of disidentification includes a variety of states of consciousness in which perception is nondualistic. The individual feels at one with, as actually being, the whole universe. Achievement of such enlightened states appears as the goal of the Eastern consciousness disciplines.

Chapter IV: Various Conceptualizations
Of Transpersonal Psychotherapy

In this research, a number of disparate-seeming perspectives were found from which transpersonal psychotherapy was viewed. I have used the term "seeming" because as these views were further collected and examined, their complimentary nature began to emerge. An orderly gestalt or organizational pattern emerges; a loose but comprehensive structure begins to show itself when the various perspectives are viewed as a whole. An ontological boundary starts to form around something that can at least tentatively be called transpersonal psychotherapy. In this section, the component parts of the whole that begins to emerge will be discussed.

Anthony Sutich: Early Views on Transpersonal Therapy

Sutich, as I have mentioned before, was a driving force in the establishment of the transpersonal psychology movement. He was publisher of the Journal of Humanistic Psychology, a close associate of Maslow,

and along with Maslow and others founded the transpersonal movement. He, essentially alone, founded The Journal of Transpersonal Psychology (1969), the American Transpersonal Association (1969), and The Association for Transpersonal Psychology (1972), the latter a membership division (Sutich, 1973, p. 2).

In the Fall, 1969 issue of the Journal, Sutich published the articles of incorporation of the American Transpersonal Association. In the various articles of incorporation, I noted that no mention at all was made of the subject of psychotherapy. The only article of incorporation that even points toward possible application of transpersonal ideas states:

To bring together persons from psychology, education, religion, philosophy and other fields who are interested in the scientific study, development, furtherance and applications of transpersonal findings (p. 105)

An early definition of transpersonal psychotherapy. Sutich wrote an article for the Journal in 1973 (1, p. 1) in which he comments on the transpersonal movement being regarded initially as an outgrowth of the humanistic movement. He notes that this had become a "narrow," exclusively "historical" perspective and that the transpersonal movement differed "significantly" from those assumptions of the humanistic movement. Now, he asserted, the transpersonal movement

had emerged as a "new paradigm" (p. 1).

Later in the same article, after noting the founding of the Association for Transpersonal Psychology, Sutich expressed that there was an "immediate concern" about the development of a "new area of therapeutic activity and its related theories and practices." Sutich notes further, "I refer specifically to transpersonal therapy." It seems clear that Sutich, for the first time, felt, with some sense of urgency, that the transpersonal movement must take a position relative to psychotherapy.

Sutich himself notes that transpersonal ideas regarding psychotherapy were first "clearly formulated" in 1972 at the time of the founding of the Association for Transpersonal Psychology (Sutich in Boorstein, 1980, p. 9).

Later in the article, Sutich asks the question, "What is transpersonally oriented therapy?" and answers it by saying,

At the present time it may be described as that therapy which is directly or indirectly concerned with the recognition, acceptance and realization of ultimate states (Sutich, 1973, p. 3)

Sutich, after stating that the transpersonal is one of the oldest "therapeutic approaches" (p. 3), clarifies his description of transpersonal therapy

further:

Transpersonal therapy is concerned with the psychological processes related to the realization (i.e., making real) of such states as "illumination," "mystical union," "transcendence," "cosmic unity," etc., as well as concerned with the psychological conditions or psychodynamic processes that are directly or indirectly a barrier to such transpersonal realizations. (p. 3)

Sutich makes a brief comparison between transpersonal psychoanalytic and behavioral concepts, arguing that psychoanalysis was not intended to deal with "impulses toward ultimate states" (p. 3) and that behaviorism's essential concepts are not related to transpersonal experiences the client may undergo. Sutich also notes that transpersonal therapy is of an intrapersonal rather than interpersonal nature.

In regard to conventional therapies, Sutich recognizes that "unfinished business" in the sense of neurotic pathology exists "in all human beings." Sutich notes that such material must be dealt with both in the therapist and clients. He says that he himself works with "all kinds of neurotic conditions" in his clients, "whether or not they are personally committed to a spiritual path" (Sutich in Boorstein, 1980, p. 10). He also notes that others, specifically psychosynthesis therapists, work both with interpersonal and transpersonal problem areas with their clients.

Toward the end of this article, Sutich asks, "What are the requirements for functioning as a Transpersonal therapist?" (p. 4). He produces a short list of answers to his own question, the most pertinent of which I will summarize. Sutich concludes that a transpersonal therapist (a) is on his or her own spiritual path, (b) is accepting of the clients' right to pursue any spiritual path or to change to another, (c) has a commitment to the principle that all human beings have impulses toward emotional growth, (d) has a responsibility to help the client in the realization of emotional growth as well as ultimate states, (e) has a realization of the mechanisms of self-deception, including their function in himself or herself [I must assume that Sutich is speaking of defense mechanisms], and (f) is accepting of individuals having impulses toward ultimate states whether or not they are on a personal path.

I must admit a certain surprise in that I find Sutich to be a poor writer. I also find large cognitive gaps and sequential blank spots in his thinking, or at least in the written expression of his thinking. I have included the above reference to his article not for its didactic or clarifying value, but because it is seminal and of historical worth.

Transpersonal Therapy Subsumes Conventional Goals

Transpersonal psychotherapy, in a view expressed by Walsh (Walsh & Vaughan, 1980), includes conventional goals of symptom relief and behavior change. Achievement of these goals in terms of "more integrated cognitive functioning" (p. 165) may or may not provide the groundwork for the development of a conceptual framework for transpersonal experiences, insights, or states.

In this transpersonal conception, the therapist assists the client in resolving, then disengaging from, psychodynamic issues, opening the possibility of going beyond them into transpersonal areas. Such disengagement facilitates the transpersonal goal of releasing the client from the restrictions of early life conditioning. As stated before, the transpersonal view of conditioning holds that individuals are trapped in the illusions of conditioning, but that release from the conditioning is possible.

Weide, a psychiatrist, offers a more complex view of the relationship between transpersonal and conventional therapy (1973). He notes that transpersonal therapists help others both to comprehend transcendent, mystical experiences and to live their everyday lives in ways that facilitate spiritual awakening.

In the same paper, Weide describes transpersonal therapy as the utilization of transpersonal "energies" during "regular" (conventional) therapy, and also as the use of "standard" (conventional) psychological knowledge and techniques for "transpersonal purposes."

Weide writes the paper from the standpoint of one trained in "ordinary, establishment-approved psychotherapy" and finds that it is important that one have a "basic familiarity" with normal and abnormal psychology in order to work effectively with transpersonal processes. He notes that standard therapies are concerned with relationships among the body, mind, emotions; relations of physical, mental, and emotional experience--all within a social, interpersonal context. Transpersonal therapy, on the other hand, is concerned with body, mind, and emotional factors and also with what can be called the spirit, sometimes in a social and sometimes in an impersonal context.

In a collection of papers edited by Boorstein (1980), a description of transpersonal vis-a-vis conventional therapy by Fadiman and Speeth appears in the introduction. They describe transpersonal therapy as encompassing the full range of behavioral, emotional, and cognitive disorders as traditional psychotherapies. In addition, transpersonal therapy uncovers and sup-

ports strivings for self-actualization.

The end state of transpersonal therapy, in their conceptualization, is not seen simply as successful adjustment or adaptation to the prevailing culture, but rather the continuous experience of that state called liberation, enlightenment, individuation, certainty or gnosis "according to various traditions" (p. 3). I must note, in passing, the use of the term "individuation" in this context. It is Jung's term for personality or psyche maturation and would fall, in transpersonal terms, in the existential level of development, short of dropping attachment to the ego.

The Fadiman-Speeth view implies that transpersonal psychotherapy may not differ from traditional therapy as much in technique as in the ontological position of the therapist. This idea is similar to one expressed by Rollo May in which he noted that existential therapy is not defined by anything the therapist does, but by an attitude or stance "that is more foundational than any technique" (Smith, 1976, p. 131).

Sutich, too, notes that an essential issue of transpersonal therapy is the attitude or orientation of the therapist, and the concomitant effect of this attitude on the therapeutic context (Boorstein, 1980). This material on therapist orientation as context bears

on the discussion of therapy content and context in the next section.

Comparing Transpersonal Therapy with Other Modalities

Because of the lack of apparent causal connections and historical research of transpersonal psychology and psychotherapy, it will be useful, I think, to compare transpersonal therapy with other modalities so that the contrasts may light up, more clearly, the boundaries of the transpersonal approach.

The psychoanalytic model and Karma Yoga. Walsh (Walsh & Vaughan, 1980) compares the psychoanalytic model of the therapist presenting a minimum of affective involvement with the client and putting aside his own feelings for the benefit of the client, with a humanistic model of the therapist.

In the humanistic model, the therapist is shown as opening fully to experience both the client's and his own responses to the therapy process. The transpersonal view of therapy then expands on the humanistic by positing a therapeutic relationship that benefits both client and therapist as the therapist also grows through serving the client. Although in a broad sense all therapists serve their clients, the concept presented here is one of modeling and of Karma Yoga, or yoga of unselfish service.

The therapist, in this mode, presents himself as one whose own growth in the therapy process facilitates that of the client. The therapist is open to the idea of using the therapeutic context to maximize her own growth. Her commitment to service is seen as the most ideal modeling that can be provided for the client. In this Karma Yoga concept of therapy, the therapist presents to the client both the model of a competent expert and that of an individual learning to cope with unresolved questions of her own, when appropriate.

Transpersonal therapy compared with psychoanalysis.

In a comparison with psychoanalysis, which holds that the ego is the primary mediating factor between destructive id drives and a puritanical superego, a strong ego is seen to be representative of healthy psychic functioning. This idea is in marked contrast to the transpersonal perspective which claims that the feeling of having an ego identity is an illusory result of distortion of perception and, thus, of reality.

Transpersonal psychology does not question the value of a strong ego as an asset in adapting to social demands, but asserts that ego development is not an ontological goal and must, in fact, be transcended in order to reach a state of pure awareness as the condition of mental well-being (Walsh & Vaughan in

Boorstein, 1980, p. 23).

In the psychoanalytic paradigm, the superego is viewed as an interpsychic structure with which the patient may or may not identify. This construct, in the transpersonal sense, applies to the ego itself. The resulting detachment from the concept of ego reduces the efficacy of ego demands, which can now be viewed by the client from a greater psychic distance. Complete disidentification from the ego and the discovery of one's true nature is considered to be liberation or enlightenment in the transpersonal view. This is derived from a concept central to Buddhism, the discovery of one's Buddha-nature, which was the ground of one's being all the time (Ross, 1980; Watts, 1957).

A comparison with Jung's analytical psychology.

Of the various methods of therapy that had their beginnings in Freud's psychoanalysis, Jung's work, analytical psychology, is most concerned with transpersonal aspects of experience.

The in-depth exploration of the psyche that takes place in analytical psychology, like transpersonal experience, extends beyond Wilber's ego and existential levels. Jung often stated that the object of therapy was not treating neurosis, but ultimately the approach to numinous levels of experience. The term numinous

is used here to mean a sense of the presence of divinity (Jung, 1965). In this regard, Jung said:

The approach to the numinous is the real therapy and inasmuch as you attain to the numinous experience you are released from the cause of pathology. (Jung, 1973)

Analytical psychology, however, is concerned with the contents of consciousness rather than consciousness itself as context. Consciousness, in Jung's frame, is seen as experience in relation to its object.

In the transpersonal view, Jung's conception remains dualistic in that it does not incorporate the idea of transcending the concept that subject and object are separate. And although Jung's model is conceived of with mythological aspects of experience acting as therapeutic agents, it does not include the possibility of direct intuitive awareness of reality which is the goal of the Eastern disciplines and a key focus of the transpersonal concept.

Transpersonal therapy and behaviorism. The transpersonal movement acknowledges that behavioral techniques have produced results in terms of modification of behavior that are unique in their ability to demonstrate, empirically, their effectiveness (Walsh & Vaughan, 1980). Self-control and self-image enhancement have become major goals of behavioral technique (Mahoney, 1974).

It is possible to view some transpersonal techniques from a behavioral standpoint. For example, meditations that enhance feelings of love or calmness use these feelings to inhibit negative ones and are close, in principle, to the behavioral technique of reciprocal inhibition, used by behaviorists to replace anxiety states with muscular relaxation. In addition, the technique of modeling, prevalent in the behavioral literature (Bandura, 1977), is thought to be central in transpersonal therapy, as noted earlier in this work.

The difference in perspective is that behaviorists are concerned primarily with easily described and measured behaviors, whereas the transpersonal interest is focused on the attitudinal and phenomenological aspects of modeling.

Transpersonal writers express a wish from time to time for more rigor in empirical testing and validation. This fairly frequent and somewhat paradoxical request for scientific and empirical efficacy will be discussed in some detail in the concluding section of this work.

Transpersonal and existential concepts of therapy.

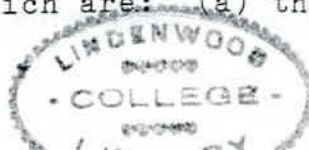
As one might assume, existential ideas overlap and converge with transpersonal and humanistic as well as phenomenological concepts insofar as they are concerned

with the meaning and purpose of man in the universe and confrontation with death and aloneness. Key to the existential concept is the idea that we create our own reality in our accumulated beliefs. We must, for example, believe that love and freedom exist before we can experience them.

Existentialists hold that by becoming aware of our roles as separate entities, we can come to experience the unity of all life (Misiak & Sexton, 1973). The raw experience of freedom and being in the world as expressed by existentialists can open awareness and lead to a personal transformation.

Unlike the transpersonal view, the existentialist may retain a separate ego identity in the process and thus a dualism, without going beyond that duality to the direct intuitive knowledge of reality that characterizes the transpersonal ideal (Boorstein, 1980).

Clarification of the difference can be made by drawing a comparison between the transpersonal and existential views of the Four Noble Truths of Buddhism. The existential position accepts the inevitability only of the first Noble Truth, "life is suffering," and struggles to reconcile life with this closed-end situation. The transpersonal position accepts, too, the other three truths which are: (a) the cause of suf-



fering is attachment, (b) the relief of suffering comes with cessation of attachment, and (c) the cessation of suffering is attained by following the eightfold path, an instruction for ethical life and mental training (i.e., yogic practices, including meditation) aimed at the ultimate attainment of full enlightenment (Ross, 1980; Watts, 1957).

Transpersonal and Humanistic Concepts of Health

Transpersonal psychology, as noted, had its roots in the humanistic philosophy. It is important, I think, that clarification of the differences in viewpoint regarding mental health be made before the section that follows on psychotherapy.

The core ideas about health in the two paradigms are actually quite different. The humanistic ideal of psychic health, as defined by Maslow (1971), is tied to the self-actualizing of the individual. A closely related humanistic concept is Rogers' idea of an individual being "fully-functioning" (Rogers, 1961, 1980).

Humanistically-oriented psychotherapy is addressed to the development and maturation of personality and achievement of ego objectives. This developmental goal is the equivalent to the ego and existential levels in Wilber's (1979) theoretical consciousness spectrum.

(An account of Wilber's seminal theory follows this section.) Although some may have certainly done so, humanistic therapists have no particular interest in exploring the transpersonal experiences of their clients (Walsh & Vaughan, 1980).

Transpersonal therapists, on the other hand, have first-hand experience of such transcendent states (Sutich, 1973) and are interested in working with clients who experience them.

When therapists or others do not have such first-hand experience and knowledge, they tend to invalidate the opinions and experiences of those who have. This factor may be an essential one in the general resistance of scientific positivists and mainstream psychology to transpersonal concepts. This phenomena will be discussed in the conclusion section of this work.

Wilber's levels of consciousness. Ken Wilber, a major theorist of the transpersonal movement, conceptualized three levels of consciousness (Wilber, 1977, 1979). These provide a useful conceptual background for discussion of various aspects of transpersonal psychotherapy and add clarity to comparisons of transpersonal with traditional therapies.

Wilber's paradigm posits the ego as the first level. This ego level includes the roles, images of

self, and conceptualizing aspects of our thought with which we usually identify. This level does not seem dissimilar to Jung's persona. The second, or existential, level involves our ontological sense of being in the world--the idea of our very existence and the meaning of life, death and being alone. Conventional Western therapies address themselves to the ego and existential levels. Their perspective is, roughly, that individuals live out their lives as beings isolated from each other and from nature. Western approaches to therapy therefore aim at improving ego strength.

Wilber, however, posits a third level, the level of mind, beyond ego and individualism. At the mind level, people experience themselves as pure consciousness, having dropped all attachments and exclusive identifications. From this perspective, the first two levels, ego and existential, are seen as illusory identifications and are held to be secondary and prior to the mind level (Walsh & Vaughan, 1980).

Content, Context and

Process in Transpersonal Therapy

Vaughan makes a major statement regarding the process of transpersonal therapy in a discussion of its content and context (Vaughan, 1980). She begins by explaining that many transpersonal therapists were trained in traditional Western methods and later be-

came interested in the Eastern disciplines. These therapists, she says, came to feel that their own spiritual experiences would enhance the effectiveness of their work with clients. Thus, the transpersonal concept distinguishes the context of the therapy, which is established by the beliefs, values, and attitudes of the therapist, from the content of the therapy, which is established by the material offered by the client.

A transpersonal therapist, notes Vaughan, is capable of working with clients who are ready to grow beyond ego considerations. Regarding clients who show such readiness, she states:

Beyond this [ego considerations] is the possibility of self-transcendence or transpersonal realization, in which the separate and isolated ego may be experienced as illusory, while the underlying oneness of existence is experienced as real. (Walsh & Vaughan, 1980)

Vaughan also stresses (p. 186) that in the transpersonal process, the client is seen as having the capacity for self-healing. The therapist does not cure the patient, but allows the patient to contact his or her own resources in a context or setting established by the therapist which "can allow natural healing to occur" (Walsh & Vaughan, 1980, p. 182).

This aspect of Vaughan's theory sounds very much

like Roger's idea of nondirective, client-centered therapy, a humanistic structure (Rogers, 1957, 1961).

Distinction between content and context. Vaughan points out an additional perspective from which to view content and context in the therapy setting.

Transpersonal content is usually offered by a client who is having transpersonal experiences (i.e., experiencing transformational processes) or who is ready to move into transpersonal areas of inner exploration. Clients who are experiencing a "spiritual emergency," says Vaughan, "do not feel adequately cared for by therapists who have not explored their own spirituality and who are not prepared to deal with it in their patients" (p. 30).

Context may be seen in two ways. As I stated above, context is established by the beliefs and values of the therapist. In another sense, context may also be viewed as the therapy taking place in the context of the consciousness of the client. Transpersonal therapy may work directly upon the consciousness of the client, altering the context in which life is experienced. This idea is opposed to that of attempting to change the client's perception of the content of experience, a Western therapeutic goal both in psychodynamic and behavioral treatment.

As identification with limited ego views is diminished, the process of resolving internalized conflicts, reintegrating disowned aspects of personality, and the attenuation of psychological scattering is accelerated.

Context of Transpersonal Therapy.

Vaughan points to the therapist's awareness of the nature of consciousness as a core element in transpersonal psychotherapy. Consciousness, from Vaughan's perspective, is both the object of and the instrument of change. The transpersonal therapy process is not as concerned with resolving the presenting problem as with establishing, within the client, a condition of consciousness in which the problems disappear or simply are no longer perceived as problems.

In keeping with the central role Vaughan ascribes to consciousness itself in transpersonal therapy, the therapeutic relationship might be deepened, for example, if the therapist is aware, in his consciousness, of the oneness of all beings and his essential connectedness with the client. Or, as another example, the therapist, aware of the ego-limited perceptions of reality, may view the therapeutic process as a setting for the awakening of the client.

The therapist, in creating a context by his posi-

tion of awareness, implies a possibility for a transformation of identity and world view for the client, depending, of course, on his sensitivity to the client's readiness to let go of constricting beliefs.

The therapist also creates a transpersonal context by holding open-ended beliefs about the process. One such belief, says Vaughan (p. 184), is that all thoughts, concepts, and values held by the therapist directly affect the therapy, whether they are expressed overtly or not. Clients within the open setting of transpersonal therapy thus have the opportunity to experience their own capacities for transformation and transcendence.

Method-free therapy. The transpersonal therapist, asserts Vaughan, understands that no particular technique will lead to the client's experience of personal transformation, but the therapist may still assist the client in removing obstacles to such an experience. If the therapist does not believe that such change is possible, the disbelief itself becomes an obstacle. If the therapist believes that such change can only take place over a period of years, the process will probably be very slow. The attainment of liberation or enlightenment, however, according to both West-

ern and Eastern mystical teachings, can take place in the seeker in an instant (Franck, 1982; Phillips, Howes & Nixon, 1977; Suzuki, 1980; Watts, 1957).

Vaughan suggests the importance of the therapist being aware of personal beliefs and biases in order to prevent those limitations from affecting the client's potential awakening.

Content in Transpersonal Therapy

Determining content. The content of therapy, then, is determined by the client and consists of whatever problems and experience the client presents. The therapist may use meditation, guided imagery, music, or other techniques, common in humanistic-oriented therapy, to evoke such transpersonal content. The techniques in themselves, however, do not define the content of therapy as transpersonal. In more traditional therapies, it is not customary to attempt to evoke client material except in special circumstances.

The nature of transpersonal content. In transpersonal therapy, content can be described as including all experiences in which the client transcends the limitation of identifying exclusively with the ego or personality. Transpersonal content also encompasses mythological, archetypal and symbolic material in the subjective experience of the client, as well as material

that comes into the client's awareness through such altered states as meditation, imagery, dreams, or the use of hallucinogens as in psychedelic or psycholytic therapies. The latter involves a therapy technique which includes the administration of small amounts of LSD or similar hallucinogen.

Vaughan notes that the attainment of transpersonal experience in itself is "not the aim of therapy per se" (Walsh & Vaughan, 1980, p. 185). Such experiences are accepted as healthy and potentially useful in facilitating disidentification from superficial roles and distorted self-image.

When transpersonal experience is validated by the therapist as a natural part of the client's nature, rather than something to be repressed or avoided, basic questions regarding the true nature of reality and one's real identity, in the sense of the question "What am I?", begin to emerge. Belief systems held by the client may then be edited or discarded, depending on the needs of the client. This phase of therapy is not unlike the reaching of a state of existential despair.

Existential despair in transpersonal therapy.

Walsh and Vaughan (1980) point out that confronting the existential reality of being in the world, being alone,

and inevitable death often leads to a form of despair or resignation in the client. The self is experienced as a separate object in a world devoid of meaning. Transcendence or integration of this state requires further dissociation from the ego in terms of letting go of both external (projected) and inner (intrapsychic) definitions of oneself. The client realizes that while manifesting a body, feelings, thoughts, and ideas, he is not these things and in fact is no thing or object.

The authors state that the beginning of the enlightenment process or inner liberation occurs when the client begins to disidentify from the ego and can begin to identify, instead, with a transcendent self, or a self that can be recognized as the detached observer of one's psychological processes (p. 172).

As noted by others in this work, Vaughan points out that the content of therapy is not exclusively transpersonal. Ideally, it reflects all aspects of the client's experience in life. In keeping with Wilber's model of three stages of consciousness described above, therapy at the ego level is addressed to developmental and interpersonal problems--those of everyday life and the achievement of goals. At the existential level, therapy is directed to concerns about

the meaning of life, authenticity, cosmologies, and purpose. At the transpersonal level, issues of transformation, transcendence, and liberation become the focus of therapy.

Process in Transpersonal Therapy

Therapy at the ego level may be considered as a stage of development related to identification, as described above in "A Transpersonal Model of the Person" (p. 27). The client, at this stage, is involved with developing ego-strength, with self-esteem issues, and with patterns of negative self-assessment. As the client is able to identify and incorporate feelings, thoughts, and previously rejected or projected aspects of self, he can begin to assume responsibility for choices and actions. My sense is that Vaughan uses the word "responsibility" (Walsh & Vaughan, 1980, p. 186) in the gestalt therapy meaning of "response-ability," or the ability to respond (Perls, 1973).

Disidentification. Disidentification is described by Vaughan (p. 186) as the second stage in the transpersonal therapy process. Work at this stage, once more following Wilber's model, relates to the existential level. At this existential stage of therapy, ego goals or personality gratification often come to be thought of by the client as meaningless.

Levels of therapeutic growth. Bugental (Walsh & Vaughan, 1980), like Vaughan, begins a discussion of ontological growth in transpersonal therapy by focusing on the integration of defenses and the energy bound up in that process (p. 190).

From a psychoanalytic standpoint, Bugental notes that clients are often able to work through resistances surviving from childhood events. In accomplishing this, there is relief and a release of the energies that were used to hold the repressions in place. For some clients, this represents a satisfactory end to therapy. The anxieties that cannot be brought under the mediation of the ego are simply relegated back to the administration of revised defenses, or resistances.

Although this state of affairs may seem incomplete, completeness in any mode of psychotherapy is always relative, not absolute. Therapy does not produce people who are supposed to be immune from repressions or resistances.

The step beyond traditional therapy. A pattern seems to be forming, conceptually, as Bugental, like Vaughan, Walsh, and Fadiman, describes the step beyond traditional therapy as one in which those clients who are ready to do so confront the existential anxiety in their lives: the anxiety arising from the circumstances

of life itself, questions on the meaning and purpose of life, being in the world, and death. Bugental emphasizes that these questions must be faced "as squarely as therapist and patient can endure" (Walsh & Vaughan, 1980, p. 191). He then notes that this is always less than fully done. Bugental then circumscribes a stage of therapy in which the client gains an awareness of how life might be with most constraints removed. This stage is viewed as a time of crisis for most clients who must face the reality of giving up old ways of being, ways that have been introjected into the client's self and identity, his very perception of himself in relation to the world.

The client now faces the possibility of living in new ways, ways that represent a departure from previous modes (Wilber points out that new levels of being generally subsume old levels rather than discarding them [1979]). Bugental makes a comparative reference to traditional therapies:

Rather than repairing and bringing the self up to date or even developing a new self, now the possibility opens of breaking free of full identification with the self in any importantly limiting way. (Walsh & Vaughan, p. 191)

Positive Outcome in Transpersonal Therapy

Vaughan (1980) addresses the same stage of ther-

apy as Bugental, above, in commenting on positive outcome in transpersonal psychotherapy. She notes that the client who begins to be in touch with the transpersonal aspects of her being begins to alter her values and thus her behaviors. For example, Vaughan posits that behaviors motivated by fear of loss, rejection, or failure alter naturally when the client realizes that such fears are grounded in illusory ego identifications. The illusory aspect occurs when one thinks of oneself as a separate, self-existent entity. Fear, for example, comes to be thought of simply as a content of a subsuming consciousness. Recognized as content rather than context, the client does not need to identify with the fear and it does not seem insurmountable.

In acknowledging a transpersonal self as the context or observer of content, any content may then be regarded as acceptable and part of the natural process of evolving consciousness.

To clarify, Vaughan explains that a client working at the transpersonal level in therapy becomes a witness to her own state of mind (contents) and experiences any such phenomena as part of a process in which she willingly and naturally participates.

As an example of successful outcome in transper-

sonal therapy, I will quote from part of a letter written to Vaughan, a therapist, from a client who had experienced, prior to transpersonal psychotherapy, a long period of traditional therapy:

I no longer examine every action and its motives in order to justify it and myself. I no longer continually measure my worth in terms of accomplishments or defined roles. I am no longer frantically involved in changing myself. . . . I have begun to gain a sense that my life (fate) is my path and to own the choices I have made on my way. . . . Two changes are a much lowered anxiety level as I have developed a capacity for inner quiet, and a loss of my obsession with death and meaninglessness, as I HAVE realized birth and death as one. (Walsh & Vaughan, 1980, p. 187)

Successful outcome of transpersonal therapy is described by Vaughan as an expanded sense of identity, in which the self is held as the context for life experience, which in turn is seen as content.

This shift in identification is often associated with a change in motivation from self-gain to service to others. Vaughan implies that this change in motivation derives from the phenomenon of less interest in specific (personal) ego goals in favor of an orientation toward service and participation in the flow of life (p. 188). One is, under these circumstances, likely to be less judgemental of life experience and have increased tolerance for paradox and ambiguity. Inner

and outer experience become integrated and harmonious. This idea, on its surface, appears much like Rogers' conception of congruence (Rogers, 1961).

Once a person has realized the transpersonal level of experience, life itself is held in a new perspective. The new meanings and values now become content with the newly discovered transpersonal self as context.

Vaughan concludes her conceptualization of therapy outcome by noting that although a transcendent experience per se is not required for the development of transpersonal awareness, it often seems to speed up the process of disidentification and transformation.

The client's view of self. Following the conceptual models of Vaughan and Fadiman, Bugental contends that the self seen by the client is an arbitrary construct of consciousness (similar to the Buddhist concept of "mental fabrications") rather than a constitutional "given" (Bugental in Walsh & Vaughan, 1980, p. 192). The particular contents of self, says Bugental, are relative, formed by the individual's own unique life experience, but certainly not immutable. He makes a key point, as did Walsh, Vaughan, Fadiman, Sutich, and Wilber, that one need not be identified with a particular ego configuration. He suggests that

one may be able to accept a way of being in the world, appropriate to one's life situation (perhaps similar to Jung's persona, but more consciously), and be able to set it aside on occasion, although he does not tell us what those occasions might be.

Bugental notes that we each create an historical record of ourselves, then use that record as a standard for determining and limiting future choices and behavior. We often find that these predetermined choices are unsatisfying.

The process of transformation. Ambivalence and stress are experienced by the client who begins to realize that the entity known as his or her identity is simply a process or series of events. The client is at the edge of a "terrible emptiness" and a "miraculous freedom" (Walsh & Vaughan, 1980, p. 192).

The client is often faced with a sense of overwhelming nothingness of being, impermanence, non-concreteness, and the infinite possibilities of awareness. In this mode, the client often manifests sensations of vertigo, anxiety, and denial.

The fear of death, notes Bugental, is only one aspect of the existential confrontation and crisis. Clients often feel "lost in space" (p. 192) with no sense of direction or continuity. Clients often per-

sist in trying to recapture a former state of existence, or repeatedly attempt to find a new and concrete identity.

Persons at this stage, says Bugental, begin to realize that the world is as much a construction of our consciousness as it is "a concrete foundation of our being" (p. 192). Bugental comments further on this idea:

We have learned from infancy to see it [the world] a certain way, and although we alter that some over the years, essentially we accept what we have been taught [and] believe that to be the true nature of being. It is not; it is our construction. Other peoples experience the world differently. (p. 192)

Bugental concludes that in transpersonal therapy, it is only after confrontation with and incorporation of the realization that our identities are only processes and that the world is an arbitrary construction of our awareness, that we can move toward "the freedom thus opened to us" (p. 192).

Subjectivity in therapy. Bugental, from a general perspective, comments on the fact that many clients entering therapy (of any kind) are not in the habit of focusing upon or giving sustained attention to their own subjectivity. Only when severe pain or distress occurs do individuals attend to inner dynamics.

When people do contact their inner processes,

they usually seek elimination of that distraction in order to "get back" to their perceived "real world" of objective concerns (p. 193). His key point here is that the world of objectivity is only given meaning through the operation of subjective processes (also a key idea of modern phenomenology).

The therapist's insistence on the client focusing on the subjective life is the beginning of real, pervasive change. One result at this point in therapy is that the client begins to experience the center of life as being within rather than external.

Focus on subjective experience is, of course, central to psychoanalysis, but in that content it is limited to an ego level, corresponding to Wilber's first level of experience.

Bugental, commenting from what could be an existential perspective, says, "The heart of the matter . . . often overlooked, is that the true home of each of us is in inner experiencing" (p. 193). The goal of therapy is to affect the subjective experience of the client that will "improve the quality of life for him" (p. 193).

A key concept is that it does not matter if particular symptoms are eliminated, modified, or unaffected, so long as the client comes to experience more vitality,

potency, and joy in life. Whether a particular behavior continues unchanged or not is trivial in comparison with the client's discovery of dignity, choice and new meaning in life (p. 194).

Speaking once more from what seems an existential rather than transpersonal perspective, Bugental comments that subjective awareness can lead to a better quality of life, rather than transformation, transcendence, and ultimate enlightenment. His statement, "We are the process of being aware, not the content of awaring," seems part existential and part Zen, certainly not in keeping with other transpersonal views of the observer self viewing the content of one's experience.

Bugental's emphasis is clearly on inner searching and concomitant awareness. He concludes by saying that our sense of God comes from "our deepest intuitions . . . to what is ultimate in our own depths" (p. 195).

Characteristics that Identify

Transpersonal Psychotherapy

As the research for this work progressed, the need to identify clearly the attributes of something called transpersonal psychotherapy became more pressing. As a corrolary to this need, the importance of identifying those characteristics of transpersonal

psychotherapy that clearly do not apply to other therapy modalities emerged as an element of central importance.

The section on transpersonal therapy compared with other therapies (Vaughan & Walsh, 1980, p. 165) addresses the basic tenets of the traditional therapy modes and, I hope, makes it unnecessary to cover that same descriptive territory here again.

The research of the literature of the transpersonal psychology movement did, in fact, produce several strong and consistent factors related to transpersonal psychotherapy. Some of these factors seem to exist, conceptually, only in the transpersonal therapy setting while others, even though appearing consistently in discussions of transpersonal therapy, can be related with equal ease to at least one other therapy. In a brief outline and discussion of these factors, I will focus on both the factors that seem uniquely and exclusively allied with transpersonal psychotherapy and those that have a more generalized application.

Characteristics that Emerged Consistently

The therapist on his or her own spiritual path.

In the section of this paper entitled "Various Conceptualizations of Transpersonal Therapy" (p. 36), I noted

that Sutich (1973) listed first in his requirements of a transpersonal therapist that "he or she be on their own spiritual path." Almost all of the therapists who contribute to the transpersonal literature mention that they are currently meditating, or have been seriously involved in meditating at some time in the past. The meditation they describe is almost always of a Buddhist type, although one described his meditation as transcendental.

A few of the therapists had traveled to the East--Japan, India or Tibet--to pursue meditation with masters there and were obviously on a "personal spiritual path." Most of the therapists, however, did not discuss their spiritual goals or activities. I am certain, however, that only a therapist who had experienced transcendent or transpersonal manifestations in himself could recognize them as manifested in clients. Therefore, one can assume that the therapists reviewed here, if not on a spiritual path have at least experienced transcendent phenomena of some kind and know, experientially, that such phenomena exist.

The recognition of spiritual factors in therapy is not exclusively transpersonal in orientation. Several therapies, including psychosynthesis, logotherapy, and Jungian analysis, focus on the spiritual experience

of clients (Assagioli, 1976; Frankl, 1969; Jung, 1965). I will conclude, then, that sensitivity to spiritual values and phenomena in therapy is typical of, but not exclusive to, transpersonal psychotherapy.

Transformation as disidentification from ego and personality. A theme that appears with regularity in discussions of the process and stages of transpersonal psychotherapy is the phenomenon of detachment of the client from previous ego-centered and personality-oriented attachments. This occurrence is usually associated with onset of a Karma-yoga attitude, one of living in service to others. Dropping of the ego and the idea of the existence of a concrete "I" is a direct mirroring of the Buddhist movement toward ultimate enlightenment (Ross, 1981) and is so conceived by the transpersonal movement.

The idea of disassociation from the ego is prevalent in other therapeutic conceptualizations, such as psychosynthesis and psychoanalysis, where one may function in an "observer" mode, viewing, in a sense, the manifestations of his or her personality/ego. In Jung's concept of individuation, the ego is seen as something no longer useful when full maturation is achieved, but replaced by more essential spiritual values.

Disassociation from ego as a specific goal of therapy does appear to be a characteristic unique to transpersonal psychotherapy.

Even if a thorough explanation of the principle of disassociation from the ego were possible, I certainly would not attempt it in this work. I do, in order that the reader does not gain the false impression that the individual somehow disappears upon detaching from ego and personality, feel the need to present the following quotations, one from Alan Watts, the other from A. F. Bentley, that give a feel for the meaning of the phenomenon. Alan Watts states:

Liberation doesn't mean loss or destruction of conventional concepts such as ego; it means seeing through it, as in seeing past confusing a place with its indication on a map. Instead of falling below the ego, liberation surpasses it. (1961, p. 19)

And from A. F. Bentley:

Should he [an individual] find reason for holding that he does not exist in the sense indicated [an ego sense], there will in that fact be no derogation from the reality of what does exist. On the contrary, there will be increased recognition of reality. For the individual [personality] can be banished only by showing a plus of existence, not by alleging a minus. If the individual falls it will be because the real life of men, when it is widely investigated, proves too rich for him, not because it proves too poverty-stricken. (p. 20)

The quotes above are not from the transpersonal liter-

ature but are the best representations I have found of the transpersonal position on the matter.

Consciousness itself as a major aspect of therapy.

The study of consciousness itself, although outside the essential focus of this paper, is a major theme in the literature of the transpersonal psychology movement. Tart (1975) has written exclusively on states of consciousness, altered states, spiritual experiences, and the need for state-specific sciences. His work is, for the most part, rigorously empirical. Grof (1976, 1984), too, has written of experiences resulting from his experience as a psychiatrist specializing in psycholytic and psychedelic therapy and claims such experience as an empirical proof of the existence of transpersonal, consciousness experience.

James (1983), Laski, (1962), Assagioli (1965), Maslow (1969), and Jung (1965), among others, have all expounded upon the reality of states of consciousness outside those recognized by traditional Western psychology. Assagioli's psychosynthesis is the only therapeutic use of concepts of consciousness apart from the transpersonal applications of their theories of consciousness, reviewed earlier in this paper.

Whereas the concepts of the observing consciousness are a major aspect of psychosynthesis and are

somewhat similar to the transpersonal concept of the relation of context to content of consciousness, it does not go nearly as far in complexity of concept or application. In transpersonal process, change in consciousness which begins with discriminating content from context later represents a complete change in world-view, a sense that for the client, the world itself is no longer the same.

In existential therapy, too, there is considerable focus on subjective consciousness regarding the existential questioning of the meaning of being in the world, life, death and alone-ness. Existentialism, however, takes a different turn than transpersonal at this point, positing that the human must make his or her own reality and life in the world. The transpersonal move is from existential despair not to a self-created world, but to transcendence, awakening, and liberation.

The transpersonal perspective of consciousness I find to be unique in comparison with other existing therapies. The focus on consciousness itself is unique to transpersonal therapy.

The goal in therapy of liberation or enlightenment. In the transpersonal therapy process, once the client has reached the stage in which dissociation from

the ego has begun, the ultimate outcome of therapy is thought to be transcendence, then liberation.

The idea of liberation is taken from the Eastern disciplines and known in Buddhist and Vedantic as Satori, Moksha, Tun Wu, enlightenment and Nirvana, among other lesser known names. The central aspect of enlightenment is direct intuitive contact with reality, a phenomenon that cannot be described in the cognitive/logical mode of everyday language (deBary, 1972; Ross, 1980; Suzuki, 1972; Warren, [1896] 1979; Watts, 1961, 1957).

It is not certain that the Western perception of awakening and enlightenment is directly comparable to that of the East, even among those who subscribe to the transpersonal movement. In any event, it is impossible to determine if the transpersonal movement means the same thing by enlightenment as do those practitioners in the East. Since transmission by word is impossible, the experience being ineffable, the question becomes circular and probably unanswerable. In any event, the enlightenment that the transpersonal movement speaks of is, conceptually, the same enlightenment the Eastern traditions speak of.

There is no other Western therapy mode that includes the idea of ultimate enlightenment in its per-

ception of positive therapy outcome. It is unique to transpersonal therapy.

Discussion of such experience is usually labeled unscientific and the experience itself held to be pathological in the view of traditional Western psychology (Grof, 1976).

The position of meditation in transpersonal psychology. The terms "yogic practices" and "spiritual disciplines" used throughout this paper refer to the experiential counterpart of the Eastern philosophical belief systems. "Practice" of a discipline, in Eastern disciplines, includes both philosophical and didactic knowledge and experiential practice. The yogic practice most often means some form of meditation in the East and always means some form of meditation in the conceptual frame of transpersonal psychology.

The transpersonal movement has shown interest in meditation since its inception in the late 1960's. This interest has been expressed both in empirical studies of altered states of consciousness in meditation and subjective studies of meditation in light of Eastern spiritual disciplines. The empirical studies are not specifically related to psychotherapy and thus are beyond the purview of this work (Grof, 1976, 1984; Lilly, 1972; Pelletier, 1978; Tart, 1975).

The Journal of Transpersonal Psychology published 35 articles on various aspects of meditation between its inception in 1969 and 1984, Volume One. Articles on meditation represented the largest subject category in the Journal. By comparison, 23 articles directly or tangentially related to psychotherapy were published in the same period. A breakdown of such data will be shown in Appendix A of this work. Of the 35 articles on various aspects of meditation, only four were related to therapy. Of the four, one speculated in a nonspecific way on meditation as a form of therapy itself (Goleman, 1971) and two others addressed patient problems related to meditation in therapy (Amodeo, 1981; Epstein & Lieff, 1981). The fourth article by Deatherage (1975) was the single piece that described the use of meditation in therapy. This same author was once more the only one to address the specific use of meditation in therapy in the non-journal transpersonal literature (Boorstein, 1980, p. 173). Because the publication data regarding these articles appears in the appendix, they are not listed in the reference section of this work.

The hesitancy to use meditation as part of therapy is based on the fact that transpersonal therapists, for the most part, received traditional Western train-

ing in psychology, of which meditation is not a part. In most of the articles in the Journal on meditation per se, the fact was noted that no empirical studies of the use or outcome of meditation in therapy had been undertaken. This would also explain the therapists' hesitancy to use the technique.

Meditation that is initiated by the clients themselves, however, is encouraged by the therapist who may offer instruction as an adjunct to therapy and as a spiritual practice. Some therapists noted that they meditated with clients, and one meditated on his therapeutic relationship with his clients for the purpose of gaining greater clarity and awareness of the therapy process.

Some clients began meditating prior to therapy, while others chose to begin at a point in therapy when spiritual or transpersonal experiences began to occur. I use the term "transpersonal experiences" here to mean non-egoic experience.

Chapter V: Conclusion

It is now necessary to view the characteristics of transpersonal psychotherapy, presented in the last section, up against the research question, which seeks to discover whether or not transpersonal psychology has its own psychotherapy.

Sutich's original attempts to describe what he named "transpersonally-oriented" therapy (1973, p. 2) were at best partial and obviously sketchy and vague. No attempt was made to relate his ideas to the literature of traditional psychology and psychotherapy.

There is no apparent connection between Sutich's ideas and those of later transpersonal authors, either theoretical or specifically addressed to therapy, that emerged from the transpersonal movement. This apparent historical discontinuity among the transpersonal articles creates the impression of disparate concepts without basis in agreed-upon presuppositions.

Because transpersonal psychotherapy claims to address ego-related and existential problems just as other therapies do, it is therefore like other therapies in that respect. However, the transpersonal literature does not indicate that transpersonal therapy has its own specific techniques for resolving such traditional ego-related problems. One is left to assume that the techniques applied to such problems depend upon the theoretical orientation of the particular therapist.

It appears that something which could, at least provisionally, be called "transpersonal therapy" comes into being only when a client has a need to grow "spiritually," beyond the need to resolve or integrate ego-based problems and beyond problems involving existential questions on the meaning of being in the world. The characteristics of transpersonal therapy identified in the last section--dropping attachment to the ego and personality, focusing on consciousness itself, and transcendence and enlightenment--do not in themselves constitute psychotherapy or techniques of psychotherapy.

When the client engages the transpersonal or transcendent aspects of self and begins a transformational experience, an appropriate therapeutic response to that experience would require a therapist who could relate

to such experience in his own life. The stages of transcendence and ultimate enlightenment would also call for the presence of a therapist who was experientially sympathetic and open to such phenomena.

Transpersonal psychotherapy could be described as the relationship itself that exists between therapist and client at this stage of the client's development. Transpersonal therapy could also be said to include the process of therapy, in whatever form it takes, during this phase. Transpersonal therapy, then, is not so much a set of techniques as it is a therapeutic condition or state of relationship.

This therapeutic condition is based on a number of factors: life experience of the therapist, resulting in a set of transpersonal sensitivities, combined with the transformational material introduced into therapy as experienced by the client. The resulting condition, setting, or ambience of the therapy encourages and facilitates further production of such material from the client in a positively circular way. If it were not for the presence of the therapist in his accepting mode combining with the evolving mode of the client as new material is introduced, no transpersonal therapy could be taking place. Does this mean that transpersonal therapy is simply the combination of

factors just described?

Another way to ask the question is: "Does this combination of factors represent psychotherapy? Is it actually therapy that is taking place?"

I use the term "psychotherapy" now in the meaning given in the "Definition of Terms" section of this paper (p. 8): "The application of specialized techniques to the treatment of mental disorders or to the problems of everyday adjustment."

If one asks the question, "Is therapy taking place in this traditional sense?", I think we would have to answer "No." No self-contained paradigm or system for therapy appears here that could be applied to a "typical" patient in our society with neurotic or psychotic problems.

The therapist has experienced something similar to the spiritual transformation which the client experiences and creates a setting, by means of his own attitudes and values, wherein the client can grow in an atmosphere of understanding, acknowledgement, support, and encouragement. Although these attributes of the setting are no doubt therapeutic, no evidence of a paradigm for psychotherapy is evident. We seem to be discussing (or conceptually witnessing) a therapeutic response to a state-specific mode of experience in the client. We

may be speaking of philosophical rapport rather than therapeutic relationship as we presently understand it (Gurman & Razin, 1975).

A study by Boucouvalas (1980) in which she presents a working outline of the field of transpersonal psychology contains a brief paragraph or two about psychotherapy compared to more lengthy comments on other interest areas of the transpersonal field such as education, individual development, altered-state phenomena, societal implications, preconditions for growth toward the transpersonal, and other categories. Boucouvalas' brief statement on therapy was the result of identifying "individuals whose publications activities, academic, professional and scientific work have influenced and shaped the growth of the [transpersonal] field." The resulting survey of the transpersonal field by Boucouvalas followed "extensive review" of such publications and included some personal interviews with the contributors.

Her brief statement on psychotherapy seems to me as vague and partial in 1980 as Sutich's did in 1973. An almost-complete quotation of the writing follows:

Therapy

Deals with existential problems and facilitates personal realization. . . . Consistent with a transpersonal orientation are: psychosynthesis, Jungian analysis, LSD-assisted therapy, logotherapy, some forms of music

and art therapy.

In general, not limited to any teaching or school. Dependent more upon beliefs and values of the therapist.

Premised on concept of self as guide (broadly defined). (p. 44)

Boucouvalas seems to be speaking of an attitude about therapy which can be found in the other, more fully developed therapies that she names. Regarding her opening statement about existential problems, it would seem that no therapy could focus on those more intently than existential therapy itself, a modality that was in place some time before the transpersonal concepts developed. The statement "not limited to any teaching or school" seems a referral to an eclectic position that could be utilized under certain circumstances in various therapies.

Paradoxically, although there is something that we may refer to as transpersonal psychotherapy, that something, in terms of this research question, is not a specific system of or paradigm for psychotherapy.

It is clear that the attainment of transcendent and enlightened states occurs independent of the therapeutic setting. For every person who begins a transformational process or attains liberation as a client in therapy, one must assume that countless other in-

dividuals experience the same growth outside of therapy.

Transcendent and transpersonal states have been attained by human beings as part of personal and religious experience since the start of recorded world and religious history. Huxley's Perennial Philosophy (1945), the work of Phillips, Howes and Nixon (1977), and Bucke's Cosmic Consciousness (1982) contain numerous examples of such phenomena that cut across time and cultures.

Although a transpersonal condition can be said to exist under certain circumstances in therapy, as noted in this work, no objectifiable process of therapy that can be seen as motivating such experience seems to exist.

In regard to the research question under consideration, then, no clear relationship can be drawn between a type of therapy and the attainment of transpersonal states.

Appendix A

Articles Related to Psychotherapy in The Journal of Transpersonal Psychology From 1969 Through 1984

Journal articles that are related to the subject of psychotherapy appear in this Appendix in chronological order. The articles encompass the period from 1969, Volume I, through Volume II, 1984.

The description following the title and publication data for each article should provide the reader with at least a rudimentary feeling for the type of subject material that was of interest to the transpersonal movement at the time of publication, or at least to the editors of the Journal. If an article contains a reference to a characteristic of transpersonal psychotherapy as described in this work, I have noted the relationship.

Almost all of the articles provide, at their conclusion, a reference list which may be of value to anyone who wishes to explore a specific area of interest.

The articles, as might be expected of a new

movement in psychology, are almost without exception theoretical rather than empirical. Many of them seem to relate to traditional journal articles on psychotherapy only tangentially, superficially, or generally.

The Journal Articles

1969, Volume I, i. Sutich: "Some Considerations Regarding Transpersonal Psychology" (p. 11). Although this first issue includes no articles related to psychotherapy, this article is mentioned for its historical value. Readers interested in the history of the transpersonal movement in relation to its most recent antecedents are referred to Sutich's article.

From this point forward in the Appendix, issues of the Journal that do not contain psychotherapy-related articles will not appear.

1970, Volume II, i. Ram Dass: "Baba Ram Dass' Lecture at the Meninger Foundation" (p. 91). This article is of interest in that Ram Dass refers to the importance of the therapist dropping ego and role attachments. Speaking to an audience of therapists and clients, he says "You will get as free of your particular role attachments as the psychiatrist is of his" (p. 108). The author then points to the Buddhist origins of that view. This reference points to one of

the primary characteristics of transpersonal psychotherapy: dropping of ego attachments.

1971, Volume III, i. Goleman: "Meditation as Meta-Therapy: Hypothesis Toward a Proposed Fifth State of Consciousness" (p. 1). This article is not related to the process of psychotherapy as traditionally defined. Goleman is concerned with the physiological changes that accompany meditation, such as basal metabolism and skeletal-muscular relaxation. He does not attempt to present meditation as a technique of therapy, but as a process that, different from the goals of conventional therapies, produces as an end-state an altered mode of consciousness. He describes the utility of the altered state and posits meditation as the "main route of the newly emergent fourth force" (p. 1).

1973, Volume V, i. Sutich: "Transpersonal Therapy" (p. 1). This article is noted in the section of this work dealing with the emergence of the transpersonal perspective.

1973, Volume V, i. Weide: "Varieties of Transpersonal Therapy" (p. 7). Weide discusses using transpersonal energies in conventional therapy and the use of "standard psychological knowledge" (p. 7) for transpersonal purposes.

1973, Volume V, i. Grof: "Theoretical and Empir-

ical Bases of Transpersonal Psychology and Psychotherapy" (p. 15). Grof postulates that there is scientific and empirical justification for the existence of transpersonal psychology as a theoretical system and transpersonal psychotherapy as a clinical approach. These conclusions are a result of Grof's experience as a psychiatrist with patients in LSD-induced transpersonal states during psycholytic and psychedelic therapy.

1974, Volume VI, i. Alan Watts: "Psychotherapy and Eastern Religion" (p. 18). Watts discusses the 19th century naturalistic concept that Western man considers the universe to be constructed, as an artifact. Watts claims that we are "mostly unconscious" (p. 19) of the way we think, of the basic belief systems within which we think and behave. He discusses the difference between mechanism and organism, i.e., growing and being made. He claims that we have come to identify ourselves with a process of consciousness which is not in actuality ourselves at all. We think that we are our idea of ourselves, our image or opinion about ourselves. As our ego and personality, this is a fictitious account, lacking in richness and depth.

Consistent with other transpersonal theory, Watts refers frequently to the illusory nature of personality

and ego, and to individuals mistaking these processes for concrete reality.

1974, Volume VI, i. Casper: "Space Therapy and the Maitri Project." The Maitri project centers around a Tibetan Buddhist psychology application of therapy. Therapists and patients live together in a small, closely interacting residential community. The culture-specific technique requires the training of staff members in Buddhist psychology and requires patients to practice a specific therapeutic discipline adapted from meditation practice called "space therapy" (p. 57).

This article, like other articles on therapy that are published in the Journal, bears little relationship, practically or conceptually, with either traditional Western psychotherapy or transpersonal therapy theories. One can only speculate that because the subject is "Eastern" and some of the phenomena described transcend the everyday personality, the subject was considered a proper one for publication.

1972, Volume IV, ii. Richards, Grof, Goodman, and Kurland: "LSD-Assisted Psychotherapy and the Human Encounter with Death." This article is based on a study of 31 terminal patients who were treated for pain, depression, anxiety, or a feeling of isolation associated with malignancy.

The therapeutic procedure involves a series of drug-free interviews in which (a) rapport is established and the patient prepared for the drug session, (b) the LSD session itself, and (c) several subsequent drug-free interviews to allow integration of the LSD induced experience. The article is transpersonal in its focus on altered states of consciousness (ASC) and involves psychotherapy, to some degree, as defined in the research question.

1975, Volume VII, i. Ram Dass: "Advice to a Psychotherapist." In this article Ram Dass answers the questions of a newly-trained psychotherapist who is experiencing difficulty resolving the conflict between the focus of his training which emphasizes an objective view of the client and the disorder, and his own human feelings of concern and compassion in wanting to fill the "real" needs of his clients.

The author speaks of his own service to others. He explains that a central factor of his work with others is allowing the others to re-perceive their life strategies and emotions; but the "real" work, he says, "is that the clients represent my work on myself" (p. 83).

The author notes, paradoxically, that he stays in total involvement with the client on the physical plane

while in a state of complete non-attachment. He conducts the therapy "the best I can," but without being attached to "how it comes out." Ram Dass states, "It comes out as God wants it to come out, not as I think it ought to come out" (p. 84).

The focus of this article relates to that aspect of transpersonal therapy in which the therapist establishes the context of the therapy process. The theme of Karma Yoga, too, is represented here--a life of service to others while working at the same time on oneself.

The author concludes that it is only from a psychoanalytic point of view that suffering is considered destructive, or some kind of problem, something to be alleviated. An unawakened person, he says, seeks pleasure and avoids pain--Freud's pleasure principle (Brenner, 1974). A conscious person (an awakened person), on the other hand, works both with pleasure and pain in order to become even more conscious.

1976, Volume VIII, ii. Walsh: "Reflections on Psychotherapy" (p. 100). As Walsh reflects on his experience in his own psychotherapy, he discusses his new understanding of the importance of self-acceptance and how some of the Eastern traditions such as Buddhism and Gurdjeffian psychology "began to assume meaning" (p. 101). The traditional psychoanalytically-oriented

therapy that Walsh experienced had "transpersonal" effects, at least in respect to Walsh's sensitivity to new conceptions of reality.

Walsh concludes that the internal dialogue and accompanying affects he had experienced for most of his life were only an illusion according to the Eastern view.

1979, Volume X, ii. Boorstein: "Troubled Relationships: Transpersonal and Psychoanalytic Approaches" (p. 129). Boorstein first presents a brief sketch of a conventional psychodynamic approach to marital therapy, then proceeds to suggest that an "extra, constructive dimension" can be added to traditional psychotherapy by using a "transpersonal approach" (p. 129).

This approach, says Boorstein, could involve the therapist sharing his philosophical beliefs with the clients via Sufi-type teaching stories. It might also include a suggestion by the therapist that the clients consider meditation practice. Boorstein notes that this approach is most effective when the couple is already committed to "spiritual goals" (p. 130).

This is a clear example of the transpersonal idea of the therapist's beliefs and values establishing the context of therapy. Boorstein says that he meditates regularly in the context of an Eastern discipline.

1980, Volume XI, i. Boucouvalas: "Transpersonal Psychology: A Working Outline of the Field," (p. 37). A brief discussion of this article appears in the "Conclusion" section of this work.

1980, Volume XI, ii. Boorstein: "Lightheartedness in Psychotherapy" (p. 105). The author's theoretical position in this article is that many people live their lives in an "inner" atmosphere that is "grim and heavy" (p. 105). He believes that traditional therapies tend to reinforce the grimness. Boorstein notes that he recently shifted to techniques in his own practice which have in common a feeling of lightheartedness and dramatic efficacy. Boorstein names six intervention techniques which he considers lighthearted and transpersonal in nature:

1. Deemphasizing the impact of a particular life story or crisis by reframing it as the content of a larger cosmic drama.
2. The use of teaching stories from major spiritual traditions. Boorstein uses Buddhist and Hassidic stories, but recognizes Sufi stories as also powerful.
3. Boorstein promotes the view that we, on some level, choose all of our experiences and thus cannot maintain that we are victims of determinism, nor do we need to continue to be victimized by present circumstances.

4. Boorstein encourages clients to use mindfulness meditation, non-judgemental self-observation, as a technique by which they may contact the witness aspect of themselves and thereby see many of their thoughts and concepts as content rather than context.

5. Boorstein presents himself and the room in which he conducts therapy in a "more relaxed and cheerful way" (p. 106) than is traditionally associated with psychotherapy.

Boorstein argues that the major value of his techniques are that they often produce

instant reversal of mood changes in which clients go from being caught up in anger or depression to laughing and feeling much more relaxed in a matter of moments. (p. 106)

Boorstein points out that the intervention itself is sometimes not intrinsically humorous, but often conflicts in a humorous way with the client's established belief system and is startling enough to produce laughter and a concomitant reduction of tension.

The author concludes by speculating that part of the mechanism through which the interventions work may be the laughter itself, which relaxes mind-body tensions, allowing new points of view to come into being.

1980, Volume XI, ii. Welwood: "Reflections on Psychotherapy, Focusing and Meditation" (p. 127). This article compares a therapy technique called focusing

and meditation practice as they both relate to therapeutic goals.

In focusing, says Welwood, the client gets in touch with the physiological feelings associated with a strong emotion and stays with the feelings, describing them in terms of location, intensity and texture, until preverbal cognitive material emerges. The emerging material puts the client in real contact with his feelings; he no longer feels as controlled by them and at the same time new information is available about the existential situation. Welwood describes the process:

Bringing the clear light of one's receptive, questioning attention to a bodily, subverbal felt sense often leads to a felt shift and turns up surprising information that allows one to move forward in new ways. (p. 129)

Welwood compares the goals of mindfulness meditation with focusing, noting that those of psychotherapy in general and focusing in particular are oriented toward:

expanding a person's sense of who he is, by healing the inner split between a part of him he defines as "I," and a part of him he treats as "other," "it." The goal of therapy is to integrate those parts one treats as alien. (p. 133)

Focusing, says Welwood, connects the knowing, judging part of oneself with subverbal felt experience,

thereby fostering creative inner dialogue. Focusing also helps clients discover their basic "aliveness" (p. 133), where they are not controlled by their problems. Clients learn to trust themselves more fully as they discover an underlying intelligence in negative and confused feelings.

Meditation, in contrast, instead of expanding the ego, or "I," inquires into what the "I" is. Mindfulness practice often results in the discovery that there is no solid, stable or even detectible "I" behind one's thoughts and sensory processes. Even the detached witnessing of thoughts is seen to be another mental perspective rather than an identity. Meditation thus leads an individual through questioning his "I" to see that (a) it is not always necessary to maintain a consistent "I" perspective or identity, and (b) this identity is a constant source of existential anxiety.

If therapy then, concludes Welwood, deals with the tension of a split between an inner "I" and "other," meditation is a step further into realization that there is no concrete "I" at all. Welwood clarifies:

In continually undermining attachment to all perspectives [conceptions], including a detached or disidentified perspective, mindfulness [meditation] helps us simply rest in our own aliveness and appreciate it as the basically open, free and "empty" core of our nature. Welcoming this "most

lucid awareness of the nonarticulated at the back of every individual thing" is [in itself] awakening." (p. 135)

In concluding, Welwood cautions against confusing the goal of psychotherapy, letting go of problems, with that of meditation, letting go of personality. Therapy goals aim at transcending problems; the goal of meditation is transcending self.

1981, Volume XIII, i. Hidas: "Psychotherapy and Surrender: A Psychospiritual Perspective" (p. 27). Hidas discusses the shattering experience of surrender that can bring the client in touch with inner unitive forces that can provide the ground or basis for growth and positive change in the self. It is not, says Hidas, to be confused with acceptance or conversion, in the sense that conversion is moving from one belief system to another.

The mode of "emptiness" (p. 27) that characterizes Hidas' surrender could be compared with the giving up on the Koan by the Zen student. The author further describes this surrender as "a final act of giving up . . . letting go of all previously held doctrines, beliefs and conceptions of self" (p. 27). Hidas notes the Buddhist idea of self as "illusory" and the Christian idea as described by Paul as the "lower nature" (p. 27).

After making several comparisons of other theories of lower versus higher nature, Hidas presents his central theme, that of the contrast between ego or personality-bound everyday modes of existence and transcendent, spiritual, transpersonal modes.

It is necessary, he posits, in every transformational process to transcend the lower, ego-personality and surrender to what Buddhists call Sunyata (the void or emptiness that is even beyond a "thing" called emptiness), or the "God's Will" of Christianity (p. 28).

Regarding implications for therapy, Hidas notes that "while not common in many therapeutic settings, the surrender experience is most likely [to occur] . . . where therapy and spirituality most clearly interweave: [in] depth psychotherapy" (p. 29).

Hidas points out that within the setting of depth psychotherapy, existential questions about the meaning of existence are likely to occur. Thus he concludes that the act of surrender is an existential reality that may have important implications for psychotherapy generally.

The author believes that there are risks involved in the surrender process without an underlying base of ego-integration. This idea is equivalent to Freud's concept of once repressed material being released into

the purview of the ego, or Jung's idea of the integration of unconscious material with the ego.

The author points out that surrender may not produce "instant transcendence" (p. 29) but instead open a door to a dark spiritual journey. St. Teresa's "demon-filled rooms of the interior castle" (p. 29) are Jung's archetypal land of the shadow. Transpersonal work that ignores the need for integration of the shadow runs a risk, according to Hidas, of transcendental denial (p. 30)--an attempted flight over or around the shadow manifestation. Hidas speculates that an integrating surrender may require the context of a healthy ego to give a sense of self-direction in navigating the difficult journey through unconscious materials. (This last idea presupposes a level of knowledge of the relationship between ego and unconscious that, as far as I know, has not been attained.)

In reference to the ontological aspect of the phenomenon of surrender, Hidas points out that surrender occurs independent of the rational, linear mind and personality. Surrender comes as a leap, a giving-up, an emptying which no rational process can produce. As Hidas explains:

Surrender comes over one in a wave, when reason, will and knowledge are no longer adequate to sustain self-directed life. . . .
A pervasive sense of despair and meaning-

lessness may herald the end of all previously held world views, as the essential impermanence, transitoriness, and illusion of all life forms is experienced as ontological truth. (p. 30)

In terms of psychoanalytically-oriented therapy, Hidas alludes to the importance of the way in which the transference is resolved as the patient is actively exploring his own depths. The interpretation of the transference can have liberating effects for both patient and therapist. The therapist should be particularly aware of any projection of God-ness or "Guru" on to himself by the patient.

Hidas notes that a conventional therapist's exclusive concentration on symptom reduction with a client who needs guidance through a psychospiritual crisis could abort the client's growth and deter the natural forces shaping her development. This is an instance when the therapist's own spiritual path and experience of spiritual journeys could be extremely important to the patient's growth process.

1981, Volume XIII, i. Smith: "Observations on Morita Therapy and Culture-Specific Interpretations" (p. 59). This paper deals with a Zen-related Eastern system of therapy. It was not designed as Buddhist but is coherent with features of Japanese culture shared with other Eastern cultures that are rooted in Buddhism.

In keeping with Zen and, in a sense, with transpersonal thought, Moritists foster a certain attitude toward emotions, work and experiential learning. This example of an instruction to Morita therapists is pregnant with the Buddhist concept of no-self and may be clarifying:

Lead them not to accumulate self confidence from various experiences. Aiming at attaining a specific mental state, like the feeling of relief, gives rise to an illusion of the reality of one's feelings, and results in establishing an imaginary self again.
(p. 60)

The author explains that what is ordinarily regarded as emotion is an extension of the self-image. "Responding to emotion becomes a substitute for direct, immediate response to present reality, and furthers the illusion of being filling, like diet cola" (p. 63). A belief, chiefly Western, that Morita intends to suppress emotions is not correct. A retraining of attention away from problems and toward the task at hand is encouraged.

Morita therapy is based on the Eastern cultural ethic of group consciousness in which an individual feels a limited sense of existence apart from his relationship to the family and larger social group.

The idea of worlds within worlds is applicable, in which human life can be viewed as a drop of dew or a lightening flash. Impermanence wherein both animate

and inanimate forms of nature engage in a complimentary harmony of energies that naturally support each other, including the human--if he does not isolate himself in ignorance as a concrete "thing."

This Buddhist idea is the one that has been adopted by the transpersonal movement--the idea of personality and ego as an illusory or secondary convenience at best.

The Morita therapy itself does not fit the Western psychoanalytic or behavioral models. In practice, Morita resembles a crude reenactment of childhood stages. Treatment, which is residential, includes (a) Inactivity for the first week. The patient is cared for by a nurse solely concerned with the patient's comfort. The patient hears her voice in the background, footsteps, and familiar household sounds. (b) The doctor's relaxed evening visit is not unlike a father saying good-night to his children, listening to their problems and fears, but not being unduly alarmed by them. (c) When the patient, despite his anxieties, is ready to enlarge his scope of experience, he is gently encouraged to go outdoors and help with adult tasks. (d) When he is ready to re-enter the societal world outside, he is "sent forth" with parental-like counsel and blessing--knowing that he may return at any time and receive the respect of other patients "not yet ready for adult

challenges" (p. 65).

Smith's conclusion indicates that his primary interest in Morita therapy is the culture-specific aspects functioning in the therapy. For the purposes of this work, however, the background concepts of the distorting aspects of ego and personality are central.

1981, Volume XIII, ii. Epstein: "Psychiatric Complications of Meditation Practice" (p. 137). The article describes a case of regression in therapy which the author attributes to meditation practice. The relationship of the subject of the article to transpersonal psychotherapy is not made clear.

1981, Volume XIII, ii. Amodeo: "Focusing Applied to a Case of Disorientation in Meditation" (p. 149). This article describes a case of disorientation in meditation. The disorientation was experienced by a client of the author who had a strong achievement-oriented ego and a similarly motivated "spiritual ego." The problem, as suggested by Amodeo, is that the client had not resolved her first-level ego problems (as per Wilber's theory) involving self-image, awareness and self-esteem, nor had she explored and acknowledged her unpleasant emotions (Jung's shadow), utilizing them as an extension of her self-image, a greater complexity of self, rather than "repressing, denying, or project-

ing them on to others" (p. 151).

This article posits the conceptualized ego and personality as limiting factors to growth and emphasizes the need to transcend personality issues and the idea of a personal "I." It also utilizes Wilber's theory of developmental levels, an exclusively trans-personal concept (see p. 51 of this work).

1982, Volume XIV, i. Wortz: "Application of Awareness Methods in Psychotherapy" (p. 61). Wortz discusses the use of awareness training and meditation in his psychotherapy practice. He states that his goals are not those of formal meditation practice or of a traditional spiritual discipline. He does, however, use techniques for developing awareness that are "like some meditation methods" (p. 61).

The author is not specific regarding types of clients who might benefit from meditation and awareness techniques. After describing several techniques he uses, the author concludes that the spectrum of conditions that produce discomfort are generally arbitrary and idiosyncratic. He notes that the concept of suffering is deeply ingrained in most societies and religions. Suffering is often, he says, a part of deeply held beliefs and presuppositions concerning families, love, values and interpersonal relationships.

The transpersonal idea of being attached to one's own personality, opinions, and concepts is a central focus of the article.

1982, Volume XIV, ii. Aitken: "Zen Practice and Psychotherapy" (p. 161). Aitken is neither a psychotherapist or a spokesman for the transpersonal concept. He is a Zen roshi, or teacher, and speaks from that perspective.

Speaking of consciousness, Aitken presents the Zen idea that the conventional continuum of lower-to-higher consciousness must be transcended, as in the Zen idea of climbing the hundred-foot pole and then going higher (Watts, 1957).

The central focus of the article is the Zen concept of the "falling away of self-concern" (p. 169). The author speaks of the energy that is released with the dropping of self concern that can then be utilized in "Karuna" or compassion for all sentient beings.

The release of such energy, says Aitken, enables us to:

devote the love in our hearts naturally according to the discrete requirements of people, animals and things. . . . Whereas the more usual kind of person is one whose environment generally points to himself . . . the person of fallen away body and mind reverses this pattern . . . in a healthy pre-occupation with the world. (p. 169)

The editors apparently chose to publish this article because of its focus on the Eastern and transpersonal ideal of dropping attachment to the ego. Here the author speaks of the ability for the individual to remain in the world not only comfortably but in a mode that is helpful to others.

1982, Volume XIV, ii. Welwood: "Vulnerability and Power in the Therapeutic Process: Existential and Buddhist Perspectives" (p. 125). The article is extremely wide-ranging in scope. It is doubtful that its essence can be captured in a brief and compacted treatment such as these are. However, I will endeavor to transmit that substance of Welwood's article which is most pertinent to this work.

Welwood is one of the major contributors of conceptual thought to the transpersonal movement. His article is an attempt to break down into intelligible, ontological increments, movement from an ego-centered existence, through existential despair, or what Welwood terms "world-collapse" (p. 125), to a creative emptiness or existence in which we do not feel the need for "meaning"--because life itself, lived directly in touch with reality, is its own meaning.

The author speaks of his own world-collapse, in which needs for success, striving to earn money, pro-

viding for a family, wanting to be loved and "other matters" ceased to have meaning for him. He experienced an existential phase, wherein he sought to make meaning through his own actions, then realized that his individual actions may also have no meaning.

At a point when Welwood felt as if he had "rolled the rock up the hill too many times" (p. 127) he turned to Buddhism, intrigued with the writings of Alan Watts and D. T. Suzuki. The reference list of this work contains two of the works that he claims meant most to him (Watts, 1961; Suzuki, 1972).

Welwood realized, he says, a solution to the existential problem. The problem was not that life was absurd or that there is no absolute basis for certain meaning. The problem, rather, lies in our conception of the self that we attempt to create. Welwood realized that he no longer had to deny anxiety, meaninglessness or feelings of despair; he found they could actually point the way to something better.

He saw that existentialism tries to fill a void of despair (the void of world-collapse) with a new meaning. Buddhism, on the other hand, does not try to overcome the emptiness, but actually provides a way to go into it further. The moment of world-collapse, in the Buddhist perspective, is seen as one moment in

a larger view, rather than a final or ultimate one (p. 128).

Welwood makes, in the following quote, a clear statement on the illusory nature of the self--the realization that the self has no solidity or continuity:

Ordinarily, the self that we know is constructed by identifying with objects of awareness that come and go--such as the occupations we perform, the things that we own, our personal history with all its drama and achievements, [and] the intimate relationships we hold most dear. All these things we hold on to, as something to identify with. . . . The word "identity" comes from a Latin word that means "the same." So having an identity literally means that we are trying to be the same from day to day. Our identity holds us together, and we use it, among other things, to avoid that experience of our world collapsing, which is so frightening. (p. 128)

The author notes that meditation experience in Buddhism can teach us that our consciousness is radically non-solid, wide open, and receptive to the world. Existentialism posits that we seek the same solidity in ourselves that we perceive in the other. From the Buddhist standpoint, the very fact that we can take things into us and let them touch us, or see them as solid, means that we are not solid but empty like a mirror, like open space.

Welwood comments that we see our spaciousness in relation to the other's solidity as a lack, as some-

thing that should be filled and made solid, too. We assume that what comes into us has a solid, independent existence unto itself. We then ask, "What am I in comparison? Who am I?" (p. 129). We fail to appreciate that the nature of our consciousness is to be [to provide] a space in which things can stand out and be revealed.

This, says Welwood, is how meditation practice can help us relate to our own non-solidity in a new way.

Welwood notes the ever-changing nature of life and of the fact that we can't move ahead until we can let go of where we have been. Freedom, he says, requires that we leave old structures behind. Meditation practice can help to show us how to let go.

As we sit in meditation, the neat "package" our ego has constructed continues to unravel. We see more clearly how we construct it, try to maintain it, and all the pain that is created in keeping the image "pumped up." Welwood points to Hume, the British associationist philosopher, who said: "For my part, when I enter most intimately what I call myself, I always stumble on some particular perception or other" (p. 130).

Hume is noting that what we are essentially aware

of are objects of consciousness. "I never catch myself" (p. 130), he says. William James was speaking of the same thing, notes Welwood, when he called attention to the continuous overlapping of thoughts that gives an illusion of ownership (James, 1983). Sartre, in the same vein, said:

The essential role of ego is to mask from consciousness its very [own] spontaneity. Everything happens as if consciousness were hypnotized by this ego which it has established, which it has constructed, becoming absorbed in it as if to make the ego its guardian and law. (p. 130)

In relation to application in psychotherapy, Welwood feels that clients in transition need the structure of a spiritual path in the face of constant change and impermanence. Cognitive understanding of the self as a fiction does not, in itself, relieve clients' suffering. In therapy, Welwood recognizes that there is an in-between stage for clients when old structures have started to collapse and no new direction has yet emerged. He states:

There is not much in Western psychology to prepare people for how to deal with such moments. Most therapists are guided by some personality theory. We think we should know who we are, like others seem to know. We don't realize that no one knows who they are, that this is the true nature of our being. (p. 131)

Welwood goes on to observe that "If we have a true self at all, it somehow lies in the heart of [the] unknow-

ingness that we face when we look inside ourselves" (p. 131).

For Welwood, meditation provides a proper context for working in this situation. He speaks of his own world-collapse in the "practice" environment of a retreat where one purpose of being there was to let one's world collapse, among other meditators with similar experience.

In speaking of our vulnerability, Welwood notes the tenderness or "nakedness" we feel when an old structure falls away before a new one has arrived to replace it. He finds this quality of vulnerability an aspect of our human-ness that we usually mask in some way. We feel our basic vulnerability every time an ego artifact disappears.

Welwood writes of this vulnerability as the literal softness of the front-exposed human being, manifesting itself as an essential sensitivity in our everyday problems and concerns. In touching this vulnerability, the client may contact an "aliveness" that can shift the way in which he holds his problems.

Welwood notes the perjorative meaning of vulnerability in our culture as loss of power, connoting weakness. He distinguishes what he terms "basic human vulnerability" from fragility of the ego, the shell we

construct around our "soft receptive center" (p. 133). We try to protect this center, he says, with a facade or mask, distancing ourselves a bit from the world; but the shell is fragile and always prone to being punctured or demolished in moments of world collapse.

It is a weak shell, states Welwood, because its fragility puts us at the mercy of things that continually threaten to puncture it. We have to try to control situations so that we do not feel threatened. On the other hand, getting in touch with our more basic human tenderness, our vulnerability, can be a source of real power.

Welwood begins his concluding remarks by stating that true inner strength lies in our being in touch with our vulnerability, rather than in the ego concept of wanting to have strength over something. The "connection between our vulnerability and our real human power is gentleness" (p. 136). We must, says the author, "learn to be gentle with ourselves." Meditation, which involves allowing our world collapse and staying with the phenomenon, teaches us to be gentle with ourselves. Buddhism describes our basic vulnerability as "the seed of enlightenment already in us" (Ross, 1980; Watts, 1957). It states that when this "tender heart" is fully developed, it can be very pow-

erful and cut through the limitations that we as human beings create.

In his conclusion, Welwood suggests that "mutual vulnerability" between therapist and client, as with any important relationship, is a crucial factor in how they affect each other. The implication is that the therapist cannot connect with the client unless he can be vulnerable with the client.

In concluding, Welwood presents a concept I have not discovered before, either in writings in the psychotherapy or the transpersonal literature. In answering a question about "meaning" in therapy (p. 137), Welwood says, "That is largely what I do with clients--we discover and unfold new meaning together." This seems to me a concept worthy of further exploration for those interested in psychotherapy outcome research.

A final quote from Welwood on the nature of the "I" clarifies his position on the subject:

Our awareness is both active and receptive. "I" is a convenient way to describe the active part of this process. "I" as an active awareness has no form that can be grasped. At the same time, there is a set of habits, patterns and structures that I can observe in my life, post facto. This is the "me" that the "I" observes. . . . "I" can observe these patterns and infer from them the existence of a solid, continuous self. But "I" can never directly experience that self. Moreover, no one has ever been able to find out who owns this active awareness. . . .

Assuming that there is an "I" that owns this awareness creates unnecessary complications. (p. 139)

Welwood notes that he does not "mix" meditation with therapy, which he considers a vehicle for developing meaning and "healthy structure" (p. 139).

1982, Volume XIV, ii. Speeth: "On Therapeutic Attention" (p. 141). The article concerns itself with different modes of attention within the therapist and directed toward the client. Speeth describes the ground of effective attention by the therapist as that of a "non-interfering" observer. Consciousness of the therapist in its wide-to-narrow modes is compared to various modes of consciousness in Buddhist meditation and other Eastern meditative practices.

The author, paradoxically mirroring a psychoanalytic idea regarding transference and countertransference, says:

the therapist could learn what the client is feeling, at least in part, by experiencing the changes occurring within his . . . own experience while performing an imitative identification with that client. (p. 148)

The author seems to be suggesting, also, a form of identification through empathy which is also a humanistic-Rogerian concept (Rogers, 1961).

In Speeth's terms, the therapist holds the image for the client in the foreground of her consciousness,

pushing what is "herself" into the background. This is done so that the identification upon which empathy is based can take place.

The author presents various aspects of attention to the client that comprise her primary ideas. These aspects include: the therapist holding steady attention on the client; being able to withdraw attention, voluntarily, from the client; being able to let her focus on the client wax and wane as a function of the "witness consciousness" (p. 151). This concept of the witness is thought by the author to be most important because of "the abundance of information it provides" (p. 151).

The therapist, notes Speeth, must be free, during identification, of her own theoretical admissions, or "compulsions of theory" (p. 156). If not, attention may turn into what should be relevant to the therapy and much may be overlooked. To believe in a theoretical construct, says Speeth, is to always discover what one expected.

It is important, too, for the therapist to be emotionally independent from the client. An open, observing attention leads to a "complimentary" relationship. Maintaining even attention regardless of content allows the client to express negative and taboo material freely.

Speeth concludes by stating that a therapist who

can move freely between narrow and panoramic focus will remain more in tune with the therapy process.

She notes that both meditation practice and the influence of Freud can be "important" (p. 159). Speeth touches on the idea of freedom of attachment to ego when she states:

to be willing to withdraw a little attention from what I am doing and thinking . . . I must have somehow reduced the need to be immersed in my life [ego] experience. I must have lost some of the addiction to the thrills of identification, and awakened a little from the dream in which most of life is conducted. (p. 159)

1983, Volume XV, i. Komito: "Tibetan Buddhism and Psychotherapy: A Conversation with the Dalai Lama" (p. 1). In this article, Komito addresses the central relationship of transpersonal psychology to the Eastern disciplines. The author had begun to feel that the attempts at "cross-fertilizing Eastern and Western psychologies might only produce sterile hybrids" (p. 1).

Komito, given the opportunity for an audience with the Dalai Lama upon which the article is based, was concerned with "the apparent incommensurability of the empirical method used in Western science and the introspective method used in Buddhism" (p. 1). In a direct answer to Komito's question, the Dalai Lama replies that the problem lies in the way a person is understood by [Western] psychologists. It lies in the strict focus

on the present life, while the Buddha Dharma [teaching] concerns the whole cycle, including the future life.

In speaking of the Buddhist teaching of the six realms into which people can be born, Komito notes that Western psychologists view them as if they are metaphoric. He emphasizes that the Buddhist means that a person can literally be reborn as a God or an animal. The Dalai Lama then asked Komito if he meant that the psychologists took the teachings as "not being true, but sort of symbolic" (p. 4). The Dalai Lama continued, "Buddhism is something different from the interpretation of it. . . . We believe there are different forms of life than what we can see" (p. 4).

In discussing his problem of feeling "sad" when working with depressed clients, Komito elicits from the Dalai Lama the comment that if one recognizes while sharing others' suffering that the suffering is due to "bad mental images" (p. 6), there can then be no problem. The Dalai Lama comments that

because of their suffering they [Komito's clients] change in their way of relating to you can now become a reason why you should love them more deeply rather than run away from them. (p. 6)

Komito further questions the Dalai Lama about the problem of psychologists taking a little knowledge of Buddhist techniques "from here and there" (p. 11), pos-

sibly doing harm to clients. This is the central question of Komito's interview.

The Dalai Lama assures him that if the therapeutic techniques are used to help others include "heavy human feeling" (p. 11) that "it is 'OK' to collect a certain thing from various disciplines."

1983, Volume XV, i. Grof: "East and West: Ancient Wisdom and Modern Science" (p. 14). Grof ranges widely in this article, essentially a comparison of the ontological, philosophical and existential differences between the Eastern and Western world-view.

He speaks of the investigative line from Helmholtz through Freud to behaviorism, which attempted to eliminate the component of consciousness as an object of "scientific interest" (p. 18).

Grof mentions Penfield (the famed brain surgeon) who, in his last book (not cited) expressed his disbelief that consciousness is a product of the brain and can be explained in neurophysiological terms. Grof states:

In the reductionistic world-view of mechanistic and materialistic science, there is no place for mysticism or religion . . . in this context, spirituality is seen as a sign of primitive superstition, intellectual and emotional immaturity, or even severe pathology that science will one day explain in terms of deviant biochemical processes in the brain. (p. 20)

Grof continues his critique of science by noting the inability of science to deal with basic problems in the area of morphogenesis both during individual development and species development, or with more complex forms of behavior. Mechanistic science, he claims, concerns itself only with quantitative aspects of phenomena.

Grof states that the powerful effects of psychoactive drugs (such as LSD) and the subsequent confrontation of subjects with birth, death, infinity, cosmology and the recognition of these factors heuristically "represented one of the major incentives" (p. 3) for the beginning of the transpersonal movement (of which Grof was a co-founder).

Grof, apparently conceptualizing transpersonal experiences as state-specific, notes that they can be induced by means other than psychedelic drugs. He notes that these include neo-Reichian therapy, primal therapy, gestalt practices, psychosynthesis, marathon (encounter) sessions, and various techniques of rebirthing.

Grof predicts the beginning of change as the "mechanistic view of people as biological machines begins to backfire . . . technology is not being used for man's good" (p. 21). He also notes that the new (quan-

tum) physics "makes the universe look less and less like a machine (referring to Newton's physics) and increasingly [like] a thought system" (p. 22).

Grof contends, in his conclusion, that the "most exciting aspect" of the new discoveries in the sciences is that the "new image of the universe increasingly resembles that of ancient and Eastern spiritual philosophies" (p. 33), i.e., Tibetan Vajrayana, Kashmir Shaivism, Zen Buddhism, Taoism, Kabbalah, and Christian Mysticism.

1983, Volume XV, ii. Gallegos: "Animal Images, the Chakra System and Psychotherapy" (p. 125). This article by Gallegos is primarily an exposition, in considerable detail, of a psychosynthesis technique involving patients' imagining various kinds of animals and their respective actions, moods and interrelationships--representing projected aspects of the patient's own personality and psyche.

The article was perhaps included because Assagioli's psychosynthesis system is sometimes described, in some of its aspects, as transpersonal. Psychosynthesis is usually associated with the humanistic rather than the transpersonal psychology movement (Maslow, 1971).

This is another example of confused or ambivalent

thinking regarding the perceiving of transpersonal therapy as a system in itself, or as a conceptual set to be used in other therapy modalities. The confusion appears even more interesting in that it apparently extends to the editors of the Journal itself.

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