Chapter 1: An Invitation

PSYCHOTHERAPY

Psychotherapy arose in response to human suffering, and, as far as we can tell, human suffering has always existed. The ancient lineage of psychotherapy is seldom appreciated because Western culture considers psychotherapy as a relatively recent development of psychiatry, one of its subdivisions. If we define psychotherapy as the treatment of mental distress through psychological means, we find records of such practices from the origins of civilization whenever priests, shamans, and witch doctors appear. While psychiatry, a category of scientific medicine, is a modern development, psychotherapy has been associated with the sacred for thousands of years. Historians of psychotherapy acknowledge priests and shamans as the first to heal the psyche. A sorcerer, his head crowned with deer’s antlers, is depicted on the wall of a cave in southern France, dating from 15,000 B.C. Psychotherapists of one sort or another have been around a long time.

Formal psychotherapy originated in the eighteenth and nineteenth centuries, when treatment was taken over from the clergy by rationalistic medicine and eventually became the specialty of psychiatry. Psychiatry at first dealt primarily with madness, but Freud’s psychoanalysis extended psychiatry and psychotherapy to neurotic and character problems as well. The scope of formal psychotherapy has been progressively enlarged and is now concerned with problems of existential human suffering, the traditional domain of religion, from which psychotherapy historically originated.

Psychotherapy appears to have come full circle. Although the modern version is quite different from the archaic ceremonies that featured magic, taboos, gods, and dramatic rituals of exorcism, there have been changes other than appearance. Its marriage to rational medicine has given psychotherapy a systematic understanding of neurotic and psychotic syndromes and refined technical procedures. And an entirely new dimension, the enhancement of the observing self, has been added.

However, Western science is characterized by a split between the sacred and the rational, which has left modern psychotherapy less well equipped than the superseded ancient, primitive versions to handle certain problems. The loss of dramatic placebo devices is not the difficulty. The issue goes deeper, involving the most fundamental assumptions of Western thought. Freud’s view of reality and that of most contemporary theorists of psychotherapy is based on a nineteenth-century physical and biological scientific model that is far too narrow to encompass human consciousness. Consequently, certain sources of suffering cannot be dealt with from within a Western framework. We are faced with major problems that call for broadening our perspective and extending our science.

THE MYSTICAL TRADITION

The mystical tradition is also ancient in origin. The oral teachings recorded in the Upanishads, Buddhist sutras, and similar records go back thousands of years and provide evidence that mystical teachers of widely different cultures say remarkably similar things. Also concerned with human suffering, they propose that human beings are ignorant of their true nature and that ignorance leads to lives of pain and futility. The sages describe a Way that leads to a higher level of existence, one infinitely more desirable than the level on which most people conduct their lives. The mystical tradition does not offer therapy in the usual sense of that word, but achieving the goal of mysticism - experiencing the Real Self - is said to cure human suffering because its very basis is thereby removed.
Often confused with religion, the mystical tradition occupies a place of its own. Durkheim suggested that human beings developed religions through their perception of the tiered, a superior realm impalpable through the five senses but one that can nevertheless be experienced. Religion and mysticism are both concerned with the sacred realm, but most religions tend to associate the sacred with a deity, whereas mysticism associates the sacred with the unrecognized Real Self of each human being. Thus, followers of formal religions often try to affect the behavior of a god - propitiating, phasing, and seeking aid. In contrast, the mystical tradition asserts the equation: I (Real Self) = God. While “I am God” is the fundamental realization of mysticism, it is blasphemous in many religions.

Because both religion and mysticism respond to the perception of the sacred, the work of mystics historically took place within a religious context although it remained distinct from the activities of everyday religious practices. For example, the wandering monks for whom the Upanishads were mitten did not perform Hindu sacrifices and rituals, but followed special practices imparted in secret by their teacher. The monks, usually thought of by laypersons as part of an established religious tradition, were actually following a teaching that said the ordinary forms and concepts of that religion were illusions one must transcend. A similar situation prevailed for Zen monks who pursued their training in the context of Buddhism.

Western culture often overlooks the distinction between religion and mysticism, especially in the psychological and psychiatric literature. This is unfortunate because the mystical emphasis on self-development makes it consonant with modern psychotherapy. The mystical tradition has been concerned with the very problems that modern psychotherapy has been unable to resolve. It makes sense, therefore, to investigate mysticism with a view to dealing more effectively with those problems and gaining wisdom as human beings.

THE PROBLEM OF MEANING

Human beings need meaning. Without it they suffer boredom, depression, and despair. Increasingly, psychotherapists are called on to deal with these symptoms as people confront aging and death in the context of a society that is coming to realize the possibility of its own decline and extinction. The religious framework that formerly defined meaning has been replaced by a scientific world view in which meaning does not exist. “What is the purpose of human life?” and “Why am I?” are questions that are said by most scientists to lie outside the scope of science or to be false, since they assume that the human species developed by chance in a random universe. According to this view, human beings are complex biochemical phenomena, of considerable scientific interest but not essentially different from anything else that science examines.

Western psychotherapy is hard put to meet human beings’ need for meaning, for it attempts to understand clinical phenomena in a framework, based on scientific materialism, in which meaning is arbitrary and purpose nonexistent. Consequently, Western psychotherapy interprets the search for meaning as a function of childlike dependency wishes and fears of helplessness or, at best, a genetic disposition toward intellectual control, preserved and enhanced by natural selection because of its survival value.

Such explanations, however tidy they may be, do not offer much help to adolescents and young adults seeking a life path, to persons confronting the anxieties of the nuclear age, or to those who experience despair as death approaches, unable to find significance in life goals based on personal acquisition, unable to find meaning in the purposeless universe of scientific empiricism. Not only are patients affected; psychotherapists fall prey to the same ailment. Consider the following extract from an article in the American Journal of Psychiatry reporting the experience of a group of therapists, aged thirty-five to forty-five, most of whom had a psychoanalytic background. The group met ostensibly to obtain peer supervision but soon became a therapy group to deal with a crisis all the members were experiencing:
The original members of the group were remarkably homogeneous in their purpose in joining. The conscious reason was to obtain help in mastering a phase in their own development the mid-life crisis. We refer to that stage of life in which the individual is aware that half of his time has been used up and the general pattern of trajectory of his work and personal life is clear. At this time, one must give up the normal defenses of early life-infinite faith in one’s abilities and the belief that anything is possible. The future becomes finite, childhood fantasies have been fulfilled or unrealized, and there is no longer a sense of having enough time for anything. One becomes aware that one’s energy and physical and mental abilities will be declining. The individual must think of prolonging and conserving rather than expanding. The reality of one’s limited life span comes into sharp focus, and the work of mourning the passing of life begins in earnest.

This depressed, resigned outlook should not be dismissed as peculiar to that particular group; it is, in fact, an approved psychiatric standard. *The American Handbook of Psychiatry* articulates its contemporary “wisdom” as follows:

To those who have obtained some wisdom in the process of reaching old age, death often assumes meaning as the proper outcome of life. It is nature’s way of assuring more life and constant renewal. Time and customs change but the elderly tire of changing; it is time for others to take over, and the elderly person is willing to pass quietly from the scene.

Here, the meaning of life is death, which provides an end to the fatigue of the elderly. What a vision!

The greatest problem Western psychotherapists face may be the absence of a theoretical framework to provide meaning for patients and therapists alike. Clearly, those struggling to overcome neurotic problems are likely to be badly handicapped when the context within which they view themselves provides neither meaning, direction, nor hope. It is also clear that science’s vision of an orderly, mechanical, indifferent universe can provide no purpose for life. Yet our lives and our psychological health depend on a sense of purpose. Mere survival is a purpose, but not enough for human consciousness. Nor is working for the survival of others sufficiently meaningful if one believes that the human race has no place to go, that it endlessly repeats the same patterns, or worse.

The “midlife” crisis with which the psychotherapists grappled probably reflects the fact that at midlife one’s own death becomes less theoretical and more probable. Goals of money, security, fame, sex, or power might formerly have given purpose to life. With experience, the limited nature of such satisfactions becomes increasingly evident. As one grows older an awareness surfaces that one is on a relentless slide toward extinction, making self-serving goals seem utterly futile. Even altruistic goals can wear thin without a larger picture of the human race than the one our scientific culture provides. As life progresses, the search for meaning becomes increasingly urgent. Profound despair and dull resignation are symptoms of failing in that search. The pervasive use of alcohol, sedatives, and narcotics in our society might well reflect many people’s attempts to suppress despair at their purposelessness, to substitute heightened sensation for meaning.

This widespread malady need not be inevitable, for it is possible that the conclusions of scientific materialism are wrong. From time to time we sense a larger reality than the one science provides, a subtle perception pointing to a better, meaningful existence. The dissonance between the scientific view and the one we intuit produces restlessness and a need for resolution. Even the pursuit of material goals may be a blind response to the urge to attain a dimly sensed reality in which purpose and meaning are facts, not
fantasies. Our ability to progress in that direction is severely hampered by our not understanding the nature of the problem, by restricting reality to the empirical realm. Indeed, Western psychological science tends to regard the very consciousness through which we know the physical world to be no more than a product of that world, an epiphenomenon less real than that which it comprehends. No wonder meaning vanishes. A physicist commented on this assumption:

Most painful is the absolute silence of all our scientific investigations towards our questions concerning the meaning and scope of the whole display. The more attentively we watch it, the more aimless and foolish it appears to be. The show that is going on obviously acquires a meaning only with regard to the mind that contemplates it. But what science tells us about this relationship is patently absurd; as if the mind had only been produced by that very display that it is now watching and would pass away with it when the sun finally cools down and the earth has turned into a desert of ice and snow,

It is as if Descartes had been stood on his head and made to declare, “I think; therefore, the world exists and I am an illusion.”

Pain and dysfunction inevitably result from the denial or distortion of reality, a consequence clearly demonstrated in the effects of the fantasies of those suffering from psychosis or neurosis. It is equally true of the fantasies and beliefs promulgated by an entire culture. Our culture’s belief in positivistic empiricism - only the tangible is real - produces increasing symptoms at the individual, social, and political levels. A person who seeks psychotherapy may be suffering from a distortion of reality, not only at the interpersonal but at the metaphysical level, and neither the person nor the psychotherapist is aware of that.

A basic tenet of mysticism is that reality as ordinarily perceived is indeed a distortion and that human suffering is the consequence of believing in that distorted view. According to mystics, the problem is compounded by human beings’ inherent need to progress in their ability to perceive the reality that underlies the phenomenal world, which can result only from the development of a higher intuitive faculty, a process called “conscious evolution.” People whose evolutionary need is frustrated experience a persistent dissatisfaction with the course of their lives. On the other hand, fulfillment of that developmental goal enables people to perceive the meaning of their own lives and the purpose of human existence. Thus, in the mystical tradition, meaning is a perceptual issue.

The problem of limited perception - as encountered in biology - has been described by C. F. Pantin:

. . . if you are not careful you may start to imagine that you can explain the whole behavior of the sea anemone by very simple reflexes - like the effect of a coin in a slot machine. But quite by accident, I discovered that apart from reflexes, there was a whole mass of purposive behavior connected with the spontaneous activity of the anemone about which we simply know nothing. (Actually, this behavior was too slow to be noticed; it was outside our sensory spectrum for the time being.)

Similarly, it is possible that the meaning and purpose of human life are outside the spectrum of ordinary consciousness, whose widening and deepening are the concern of the mystical tradition. In fact, some see the evolution of consciousness as the principal task of the human race. Western psychology, in its often-vain attempts to explain away the sense of meaninglessness and its attendant symptoms, may have much to learn from mysticism, which sees meaning as something real and accessible to consciousness, provided the appropriate perceptual capacity has been developed.
THE OBSERVING SELF

The fundamental questions, “Who am I?” and “What am I?” arise increasingly in the struggle to find meaning and purpose in life. Therapists hear them as explicit queries or to indirect form: “Who is the real me?” or “I don’t know what I want - part of me wants one thing and part of me wants something else. What do I want?” Western psychology is severely handicapped in dealing with these questions because the center of human experience - the observing self - is missing from its theories. Yet, at the heart of psychopathology lies a fundamental confusion between the self as object and the self of pure subjectivity. Emotions, thoughts, impulses, images, and sensations are the contents of consciousness: we witness them; we are aware of their existence. Likewise, the body, the self-image, and the self-concept are all constructs that we observe. But our core sense of personal existence - the “I” - is located in awareness itself, not in its content.

The distinction between awareness and the content of awareness tends to be ignored in Western psychology, its implications for our everyday life are not appreciated. Indeed, most people have trouble recognizing the difference between awareness and content, which are part of everyday life. Yet, careful observation shows people that they can suspend their thoughts, that they can experience silence or darkness and the temporary absence of images or memory patterns - that any element of mental life can disappear while awareness itself remains. Awareness is the ground of conscious life, the background or field in which all elements exist, different from thoughts, sensations, or images. One can experience the distinction simply by looking straight ahead. Be aware of what you experience, then close your eyes. Awareness remains. “Behind” your thoughts and images is awareness, and that is where you are.

What we know as our self is separate from our thoughts, memories, feelings, and any content of consciousness. No Western psychological theory concerns itself with this fundamental fact; all describe the self in terms of everything but the observer, who is the center of experience. This crucial omission stems from the fact that the observing self is an anomaly - not an object, like everything else. Our theories are based on objects: we think in terms of objects, talk in terms of objects. It is not just the physical world that we apprehend in that way; the elements of our mental life are similar. Seemingly diffuse and amorphous emotions are localized and observable; they have definite qualities. Emotions, like fluid objects, are entities we observe. Images, memories, and thoughts are objects we grasp, manipulate, and encompass by awareness just as we do the components of the physical world. In contrast, we cannot observe the observing self; we must experience it directly. It has no defining qualities, no boundaries, no dimensions. The observing self has been ignored by Western psychology because it is not an object and cannot fit the assumptions and framework of current theory.

Lacking understanding of this elusive, central self, how are we to answer the essential questions “Who am I?” “What am I?” that lie at the heart of science, philosophy, the arts, the search for meaning? To find answers we must step outside the boundaries of our traditional modes of thought.

Here too the mystical tradition has focused on an area ignored by Western science. Both Yogic and Buddhist metaphysics and psychology emphasize the crucial difference between the observer and the content of consciousness and use meditation techniques to heighten the observing self. As with meaning, mystics hold that answering “Who am I?” and “Why am I?” requires a special mode of perception. That claim is not surprising, considering the anomalous character of the observing self. To understand the “I,” we should first learn what the mystical tradition can teach us about it.

MOTIVATION AND CONSCIOUSNESS

A third area in which the mystical tradition can contribute to Western psychotherapy and Western culture is in the effect of motivation, or intention, on an individual’s state of consciousness. Although modern psychotherapy is expressly concerned with motivational dynamics, it tends to address motives only when
they produce conflict giving rise to symptoms. Yet there is considerable evidence that motivation is a major factor in the organization of consciousness. A person driving through rush-hour traffic to get to an appointment on time or relaxing after dinner and listening to music experiences in the two activities different modes of consciousness that are distinguished by different kinds of attention, acuteness of time sense, degree of self-object differentiation and so on. This issue is important for psychotherapy because the state or mode of consciousness is the ground from which symptoms arise and largely determines the nature of those symptoms.

The mystical tradition has sophisticated appreciation of the relation between basic motives, cognition, and perception. Much of the work of a mystical school focuses on exposing and changing motivations of its students as they express them in attitudes and everyday conduct. The need to change the mode of consciousness to develop a special perceptual capacity is seen in part as a need to lessen the intensity of motivations connected with the object self, the “ego.” Although the mystical tradition is not a therapeutic system – the amelioration of symptoms is not its goal – symptoms often diminish as a by-product of its activities. An individual no longer dominated by motivation derived from the object self achieves a different perception and a different cognition, and symptoms disappear. Although the disappearance of symptoms is a goal for Western psychotherapy. Psychotherapists and patients alike stand to gain in their purpose by attending to the mystical tradition’s teaching about motivation and its relation to consciousness, issues that affect all aspects of their lives.

The problem of meaning, the observing self, and the effect of motivation on consciousness are all related. The enhancement of the observing self permits knowledge of one’s motivations and the possibility for change. Change in motivation permits one to develop intuitive perception, which provides access to meaning. These vital areas and their interconnections are ones to which mysticism has paid special attention and about which it has gained special knowledge. Western psychology, were it to draw upon these insights, could achieve a larger understanding of human consciousness, which would not only increase the scope and effectiveness of psychotherapy but answer other needs even more important to our well-being.

For these reasons, we should consider what the mystical tradition can offer us, and explore its relevance not only for psychotherapy but for health and human development. If we do, I believe we can enter a new era of understanding that will clarify what we have thus far not been able to understand: the self. Our psychological theories are clumsy and inherently contradictory because we have misunderstood the observing center, the ground of our experience. As a result of disregarding the unique character, the transcendent nature of that observing self, contemporary psychology has been unable to free us from the confinement of our isolating and impoverishing assumptions.

For many years the voice in the night has been deaf to itself. It is time to listen.

[Endnotes omitted]