

## **Taoism, Processwork and Disturbing Adolescents**

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Nothing in the world  
Is as soft and yielding as water.  
Yet for dissolving the hard and inflexible,  
nothing can surpass it.  
The soft overcomes the hard;  
The gentle overcomes the rigid.  
Everyone knows this is true,  
But few can put it into practice.  
Therefore the master remains  
Serene in the midst of sorrow.  
Evil cannot enter her heart.  
Because she has given up helping,  
She is peoples' greatest help  
True words seem paradoxical

Tao Te Ching

For many, adolescence is a time for finally being accepted as a sentient being, assuming adult responsibilities, and trying many new and different experiences. Teenagers may go to school, talk on the phone, experiment with alcohol, tobacco and other addictive substances, "hang out" with their friends, and look for that special significant other that they might eventually accept as a partner. It is a time for exploring sexual feelings, thoughts, attractions and body sensations. They may form intense but relatively unstable relationships as they "go out" and discover their own and others gender and sexual preferences. At some point during the years from thirteen to eighteen many people get their first job. They become increasingly emotionally independent from their parents and more firmly established in their own identities. Adolescents in general, are concerned with getting a driver's license, finding a partner, maintaining or enhancing their image, getting along with their peers, getting a job and/or an education and acquiring an automobile. They might also exhibit concerns about their bodies, their clothing and other possessions and their siblings and parents (not necessarily in that order).

In addition to the above set of experiences and problems some adolescents might, at this stage in their life, find themselves in repeated conflicts with the juvenile justice system, be labeled with a psychiatric diagnosis of one category or another, and/or find themselves in a residential treatment center or psychiatric hospital with their behavior closely monitored and subject to many contingencies. For over 20 years I provided psychological services to these types of adolescents. I have provided thousands of hours of individual, family and group psychotherapy to many adolescents. For the most part I have worked with adolescents in residential treatment whose placement averages from six to nine months.

The typical adolescents I've worked with have lengthy histories of juvenile court involvement, multiple psychiatric hospitalizations, poor school performance, and drug and alcohol abuse problems. Many are gang involved and a substantial number of them have been in trouble for sexually abusing others. Some might call these adolescents "disturbed" and this label is often applied to teenagers with these sorts of problems. In fact they are rarely concerned or disturbed about their behavior and rarely uncomfortable about it unless they are caught and face serious consequences. Often it is therapeutically beneficial to increase their discomfort about their own behavior and, as Stanton Samenow suggests, instead of "comforting the afflicted" one might end up "afflicting the comfortable" It is generally parents, teachers, therapists, case workers or police who are disturbed and the adolescent's behavior that is disturbing.

Traditional psychotherapy has been of little benefit in enhancing the psychological growth and healthy development of adolescents with these problems. Some authors have even suggested that if you don't get those labeled as conduct disordered into treatment before age four that there is little that can be accomplished with them. This has not been my experience, and data my colleagues and I have collected indicates that many of them can and do show significant benefit from treatment. The intent of this manuscript is to share my experiences in working with this population and to address the effective psychotherapeutic treatment of these individuals. In particular I would like to discuss the efficacy and practice of conducting group psychotherapy with them.

My purpose in writing this paper is to convince others to offer more process oriented group psychotherapy to those teenagers who are involved in the corrections and/or psychiatric mental health systems. In doing so I am writing to a dual audience consisting of traditional psychotherapists who may not know of process oriented psychology or the work of Dr. Arnold Mindell, and Processworkers who might be uncomfortable with conventional approaches to treatment and the labeling, diagnosing and medication management associated with many psychiatric settings. In the presentation of this document I embrace many different perspectives. Sometimes I am writing as an ex-marine at other times I am a concerned citizen, adolescent therapist, youth leader, Processwork student, psychologist and/or parent. I realize that, despite my best efforts, it is not always clear which perspective I am writing from. I have many life experiences from all

these perspectives, and more, and wish to integrate and share these ideas in addressing the multiple causes of distress and despair faced by many teenagers in today's society. In reading this paper please be aware that many of the ideas and treatment approaches are really a mix of Processwork, more traditional approaches and newer innovations with roots in both traditions.

Why group psychotherapy? Why not individual therapy? Why not family therapy? Why not milieu, wilderness, or recreational therapy? In the best of all possible worlds of course, one would want to be able to offer all of these kinds of psychotherapy to adolescents, and more. Given the budget constraints of the current managed care environment, however, difficult choices regarding the types, amounts and frequencies of various forms of psychotherapy have become a necessity. With very little research data to draw from, it has been assumed by administrators, legislators and insurance executives that individual and family psychotherapy should be the mainstays of adolescent treatment and these approaches have been helpful to a great number of adolescents. However, those adolescents who have not responded well to individual or family therapy are often then placed in long-term structured setting and continued on a treatment regimen consisting mainly of medication and family therapy.

Many of the individuals who most closely effect treatment design decisions and/or hold themselves out as "experts" on the subject of adolescent psychopathology and treatment, may in reality have little actual experience in providing psychotherapeutic services to this population. When I first began to provide weekly psychotherapy sessions to adolescents over twenty years ago, I thought that most of the therapeutic impact would occur in family therapy sessions. Over time I began to question this assumption as I saw little change from any adult interventions, including parents, and much greater therapeutic response from peers' feedback. More recently, some colleagues and I have conducted empirical research that clearly indicates that group and individual therapy have the greatest impact in reducing crime subsequent to treatment, in the population studied, while family therapy may not have any impact on the measure whatsoever.

Quite often in individual treatment, adolescents will deny, minimize and lie about their activities during the previous week. They may engage in conversation only minimally and try to tell the therapist what they think he or she would like to hear. They may repeatedly respond to simple questions with "I don't know" or "I don't care." It is easy to begin a pattern in which the therapist lectures the client and the client repeatedly promises to do better, with little behavioral follow-through.

Family therapy is helpful in addressing some of the above problems. If teenagers try to lie about their activities or intentions, parents can easily correct these statements. If family systems problems affect the teenagers it is often possible for other family members to change and achieve desired therapeutic changes in the identified client. However, if the teenager refuses to accept responsibility for the consequences of their own actions and instead blames their parents and other

family members for all their problems, then sessions can quickly degenerate-- further supporting and rationalizing their criminal and delinquent activities.

If families were, at one time, relatively functional and then due to some stressful event such as death or divorce became less so, the prognosis for effective family therapy is fairly good. However some families are invested, for one reason or another, in preventing the adolescents' psychological growth and eventual individuation. Some have abused and neglected these teenagers when they were children and/or currently abuse them. Others simply don't care or are involved in long established patterns of criminal activities and drug and alcohol abuse. In these cases it may be naïve to assume that a few sessions of family therapy and clever comments or interventions are going to have lasting therapeutic impact and radically alter systemic problems of long standing duration. In fact, such intervention attempts may be iatrogenic if they bolster or support a corrupt authoritarian structure in which the teenager is victimized, taken advantage of or forced into a role as the "identified patient." In these instances it makes more sense to explore other treatment modality options.

Adolescents are much more sensitive to peer pressure than adults. They tend often to form clubs, groups, bunches, and gangs, even without adult intervention, help, or encouragement. They often refer to their gangs and fellow gang members as family. What force drives them to do this? What are they looking for? What is right, for them, about being in a group with an internal rank, status and hierarchy that has a clearly defined set of rules and definite boundaries? How might we harness and direct this energy to enhance personal growth and achieve psychotherapeutic change?

My colleagues and I published an article in *The International Journal of Group Psychotherapy* entitled "Reductions in Criminality Subsequent To Group, Individual and Family Therapy in Adolescent Residential and Day Treatment Settings" (Byrnes, Hansen, Malloy, Carter and Curry, 1999). We found a strong statistical link between increases in the provision of group and individual therapy and subsequent reductions in criminal activities. We found no such connection following increases in the provision of family therapy. We also found that although the immediate effects of crime reduction were similar for both Day Treatment and Residential clients, the rates of incarceration for adults who had been in Day Treatment as adolescents were twice as high as those who had been in Residential Treatment.

For many adolescents, the opinions of their peers are considerably more salient than what any adult might possibly think, say or do. Adults may complain of making a comment to a teenager only to receive a limited or complete lack of response from the person being addressed and minimal impact. They may later observe the teenager paying attention and obviously understanding the concept when a peer says exactly the same thing. Because of their increased sensitivity to peer pressure and group opinions, it only makes sense to incorporate and take this

natural phenomenon into account when considering treatment design and implementation options.

If the above statements are true, why isn't more group therapy offered? It may be that those in charge of day-to-day operations and providing milieu services do not desire a cohesive peer group to form and would rather "divide and conquer." They may not want to deal with the emotional aftermath of groups or witness the adolescents display strong emotions or become upset.

It is also difficult for therapists to conduct group treatment. It means giving up the safe havens of our individual offices and the support of other adults. We have to deal with a group of adolescents alone without the presence and supportive discipline of their parents and families. It also means being outnumbered by a group of young people, many of whom have been sexually and physically abused and neglected, some by their own parents, scout masters, teachers, and therapists. As the representative adult in the group, it is possible that a number of unpleasant transference situations can develop. It may become increasingly clear that one is outnumbered and if violence, directed at the therapist, were to start, the group would certainly have the physical advantage. For therapists who have control issues, a strong need to be liked, or are overly afraid of threats of violence or strong affect, group therapy might be avoided altogether or watered down to the point that an effective and safe container for treatment might never be achieved.

Despite the above drawbacks, one might still forge ahead and attempt to offer group psychotherapy to adolescents. Why process oriented therapy? Let us first make a basic distinction between content oriented and process oriented group work. In content oriented work it is assumed that there exists some body of knowledge that, if only the adolescent understood, would cause them to make appropriate personal changes. Examples abound; the Twelve Steps from Alcoholics and Narcotics Anonymous, Self Esteem Classes, DARE, Colors, various religious materials, Scientology, Tough Love, Scared Straight, Louis Busgalia, Meditation, EST, the Forum, Sex Abuse Prevention Training Programs, Cognitive Behavioral Approaches, Thinking Error Prevention Techniques, Etc. There is a time and place for all such interventions but the basic assumption remains that someone or something knows more or understands the client best.

In process oriented group work, however, it is assumed that there is benefit in allowing the group and its members to establish what is discussed. One session might focus on violence, another on peer relationships, love, child sexual abuse, the prison system, drug and alcohol problems, racism, sexism, etc. Rather than try to direct, lead and teach, the facilitator attempts to follow, understand and "unfold" the material. Sometimes the groups requests further information or clarification and at that point content information might be furnished and discussed.

Why might it be beneficial to allow group members to guide the discussions? There can be a certain wisdom in a group and group problems solving skills can be advantageous. Positive peer pressure can influence individual members' decisions.

Group members can learn from others' experiences. This format also allows individuals to express themselves in ways that they may not have been allowed in other settings.

Parents, caseworkers, counselors, therapists and others who work with disturbing adolescents can make both type I and type II errors. Type I errors consist of behaviors, by the caregiver, which enable or support, minimize or justify, and /or excuse or blame others for adolescent criminal activities. The enabler often means well and has a great deal of sympathy for the teenager. Often they enjoy being in the role of the rescuer and hope to improve their relationship with the teen by vilifying the attempts of others to hold the adolescent accountable for the consequences of their actions. At times they put themselves or their loved ones at risk. It is not an act of kindness or love to allow a thief access to your home or a pedophile access to your children. Parents can pay their children's fines, hire excellent lawyers, and get their children placed in psychiatric rather than correctional settings. When the child becomes eighteen and becomes involved with the adult correctional system however, they may find to their dismay, that they are no longer able to provide such protections. The child then ends up paying for the over-protective stance of the enabler.

Type II errors are made by those who are overly punitive or harsh with juvenile offenders. Disablers overreact to common child or adolescent misbehaviors, errors in judgment or exploratory activities. They may confuse child sex play with criminal sexual child abuse or exploration with mind-altering substances with addiction or drug dependence. With disablers the punishment rarely fits, and often exceeds, the crime. When disablers are in the role of therapist they often make statements to the effect that "if you don't reach these antisocial types before age four, nothing can be done with them" or press for mandatory minimum sentences. Their approach is punitive and they rarely recognize the tremendous capacity for change that is possible for adolescents. How many teens can you remember from your own teenage years who raised hell and caused problems who are now attorneys, doctors and successful business persons?

"Abling" is not a word, but perhaps it should be. I am using this word to describe those who can hold disturbing adolescents accountable for their actions in a loving and consistent manner. They can adjust the consequences to fit the offense in a fair, firm and friendly fashion. They can protect their own and others' boundaries and they can directly discuss the behavior of others. Ablers are nurturing without smothering, challenging yet cooperative, and understanding without excusing--not exactly an easy task but one which can be rewarding and successful when working with this population.

## **CONSCIOUSNESS**

Understanding consciousness and its connections with behavior is essential in following others' awareness and process, including teenagers. Behavioral change often occurs following an insight, an Ah-Ha experience, or perceiving a situation

from a different perspective. As most therapists are aware--they may point out numerous maladaptive behavioral patterns, but until the client discovers these issues in their own manner and on their own terms, there is little enduring behavioral change or psychological growth.

In our discussion of consciousness let us, for a moment, explore the psychological phenomenon of double signals. For instance, what if a young man states "I am not angry," in a loud voice while making a fist and hitting the table in front of him; or a person might state to their professor "I'm interesting...uh...I mean, interested in the transformational process you describe," as they smile and blush; or perhaps an acquaintance states how much they care for you and how close they feel while standing sideways, at a distance, with little eye contact and a frowning expression. What are we to make of these attempts at communication and the apparent inconsistencies in their meanings? Obviously double signals are a complex yet common form of human expression, and although it is difficult to be aware of our own double signals, close scrutiny of others reveals a propensity for communicating in this fashion.

Over the years, psychological theorists have attempted to deal with this phenomenon in various ways. Some have ignored the behavioral elements and focused instead on the expressed content. If you ask people who are double signaling to explain or clarify their message they typically describe the behavioral part of the message as unintended or accidental. Other theorists have focused on the behavioral aspects and ignored the expressed content as trivial, subjective, or a rationalization. Still other theorists have made use of static concepts such as manifest and latent content or the conscious and the unconscious mind or the personality and the complex or splinter personality.

These static dualistic concepts have shed light on the phenomenon of double signals but have been problematic in some ways as well. For instance, if you have worked with patients who are in a coma or near death it becomes clear that the concepts of conscious and unconscious are inadequate to describe the psychological processes the client is experiencing. These concepts can lead to a number of paradoxical, confusing and logically incompatible statements such as, "While your conscious mind reviews the material I have presented thus far, your unconscious mind may or may not be aware of the fact that you may know all that you know that you don't know that you know, yet." Although such statements and concepts might aid in inducing trance they can also interfere with our understanding and conceptualization of other experiences. Jean Sartre has addressed these problems of the traditional model of the conscious and unconscious mind in an excellent article entitled "The Nature of Self Deceit." In this article he asks how one might go about identifying those things or thoughts of which one can't be aware because they belong in the unconscious. He then points out the paradox inherent in initially identifying a thing one cannot see.

Dr. Arnold Mindell-- a psychotherapist, analyst, teacher, author, and conflict resolution facilitator--has proposed a process-oriented model, which may aid us not

only in understanding double signals, but also in conceptualizing human experience and communication in general. One of the important theoretical contributions of Process Oriented Psychology is that it describes consciousness as an activity rather than an entity. The process referred to in "Processwork" can be viewed as the process of consciousness through its many manifestations. In trying to describe consciousness as an activity rather than a depository of information we run into a number of limitations of language and imagination yet anyone who compassionately observes their own internal consciousness knows that it is an active, changing, cycling experience. They might also notice certain habitual patterns of consciousness in which a forbidden thought, desire, or image results in an abrupt change of the previously existing chain of consciousness. Often, the forbidden thought which precipitates the shift in consciousness is connected to deeply held beliefs about one's identity, personality or self. Might there be value in suspending the habitual patterning and pursuing, following, or unfolding the forbidden material, psychically completing the initial pattern and finding out what happens next? Could this be a different perspective from which to describe the process of consciousness and another way to bring unconscious contents to consciousness? In some ways consciousness is like the Tao.

The tao that can be told

Is not the eternal Tao.

The name that can be named

Is not the eternal Name.

The unnamable is the eternally real.

Naming is the origin

Of all particular things.

Tao Te Ching

## **PROCESS ORIENTED PSYCHOLOGY**

I have found it extremely helpful to apply the theoretical constructs and associated applications of Process Oriented Psychology in my work with disturbing adolescents. Processwork, as developed by Dr. Arnold Mindell and his colleagues, has its roots in Jungian psychology, Taoism, and modern physics and is based on the belief that problems themselves carry the seeds for their own solutions. I will briefly present some of the core Processwork theoretical concepts and will later return to the discussion of how these formulations can be applied to group psychotherapy with acting out adolescents.



Dr. Mindell suggests that double signals may best be described in terms of two dimensions. The first dimension has to do with how close or distant the information process is from awareness. Is it a primary or secondary process? The second dimension has to do with which channel or representational system the information is conveyed in. These channels are based on common sensory experience.

We readily identify and generally use I statements to describe a primary process. "I am generous," "I am bright," "I am attractive," and similar statements would fall in this category. Secondary process is that with which we do not readily identify but, nevertheless, is likely true of us in some sense. Statements such as "He is stingy," "My car is powerful," or "The computer is mixed up," might be examples of secondary process, if in fact it is I who is stingy, powerful and/or mixed up.

What separates and distinguishes primary from secondary process? Processworkers refer to the "edge" as the separating mechanism. The edge is like the border of identity. It is maintained by the life philosophy and entire belief system an individual holds to be true about themselves. For example, if someone is convinced that they are a pacifist and a person who wants to avoid conflict and violence at any price as a primary process, they may be unaware of a secondary process that involves aggressive physical posturing, signals of irritation, or passive/aggressive behaviors in themselves or others. That which is forbidden in primary process will occur in secondary process, in this case the person who considers themselves to be a pacifist might dream of a fight or war, be interested in aggressive people, or find themselves often witnessing others who are angry or in conflict.

The point at which the client says "this I cannot or will not do" may be the point at which they have reached an edge. They may not be able to look at something, hear a certain voice or noise, make a certain movement, or feel a specific feeling. The border, the limits, the boundaries of personal ability tell us where the growing edge lies. Processwork deal with the edge by staying near it, by switching channels and going around it, by letting it be, or by jumping over it. The emphasis is on those means which achieve positive feedback from the client.

As Dr. Mindell points out in his book, Rivers Way, "The edge splits processes up into primary ones which the client identifies himself with and secondary ones which he feels are not directly associated with him. The edge contributes to making the individual congruent and incongruent with primary processes." He encourages us to remember that, "Double signals are natural, normal human phenomena which occur as disturbances in communication with yourself and with someone else as well. They are a combined product of your spontaneous creativity, of the existence of channels which are not at your disposal, of conscious inhibitions and of your inability to admit paradox."

Channels are representational systems or maps of reality. The four cardinal channels are visual, auditory, proprioceptive and kinesthetic.

The visual channel is usually the most highly developed. It allows us to view patterns from different perspectives and to gain emotional distance. It contributes to what we normally call insight. Work with dreams, images, and the visual component of active imagination all apply to this channel. Statements such as "This needs to be looked at," "I see what you mean," and "You need to alter your view of reality," all indicate that information is being processed in the visual channel.

The auditory channel allows us to tune into verbal communications, music tone, tempo, pitch and volume. Internal dialogue also occurs in this channel. When sentences such as "Sounds nice," "Good talking to you," and "Listen to me" occur this signifies information is being processed in the auditory channel.

The proprioceptive channel has to do with internal sensations and feelings. When stomach aches, sexual excitement and body feelings are discussed this signifies that proprioception is the active channel. We might hear someone in the proprioceptive channel speak of feeling pressure, depression, pain or joy, or being turned off or on.

The kinesthetic channel focuses on body position and movement. Body energy often evolves from one motion into other movements, into dance, or into other channels. Processworkers pay particular attention to movement or lack of movement in the face, hands, legs or torso.

There are three composite channels which are often referred to in Processwork. These are relationship, world and spiritual channels. The term composite refers to the fact that these channels are formed in combination with other channels.

When I first encountered the notion of relationship as a channel I found it difficult to understand. The longer I study Processwork the more important I feel this concept is, and the more it has to offer. When in relationship, it is often difficult to tell, psychologically, where one person ends and the other begins. Often such forces as "projective identification," "transference" or what the Processworkers refer to as "dreaming up" come into play. The concept of dreaming up suggests that if someone in a relationship projects on to another, there is a tendency in the other to become more like the projected figure. The relationship channel can foster the growth of a dream field that is as expressive as any nighttime dream that might be expressed through the visual channel. Processworkers often attempt to identify different levels when working with relationships. These include noticing the relationship field and the myth or dream of the relationship, communication patterns, individual work with each member in the relationship, mood work and noticing the cycling between high and low aspirations or dreams regarding the relationship. For quite some time it has been my opinion that in psychotherapy it is often the relationship between client and therapist that is the essential curative factor rather than any clever intervention, modality or treatment or theoretical orientation.

The world channel refers to politics, jobs and money problems, unfamiliar people, foreign objects and events, and ecology. When inner work and other synchronistic parallels are noted between personal work and what we read on the front page of the morning news, this indicates the influence of the world channel.

The spiritual channel can refer to shamanism, mysticism or more traditional religious experiences. Whether or not one has a personal belief in God, it is obvious that spiritual beliefs have had an immense impact on human history and continue to influence both behavior and consciousness. Dr. Mindell also frequently teaches with reference to Don Juan Mateus and the books of Carlos Castaneda. Concepts such as “accepting death as an advisor,” “erasing personal history,” and “reliance on second attention” are all applied in Processwork.

There is one other extremely important concept that must be understood if we are to become familiar with Processwork, namely the notion of the “dreambody.” Dr. Mindell defines the dreambody as a multi-channeled information sender, which asks you to receive its message in many ways and he notices how this information appears over and over again in dreams and body symptoms. He had observed that there is often a metaphorical match between dream symbolism, body symptoms and channel communication-- which are all functions of secondary process. Consciousness appears to be multifaceted in that if any two of the above three elements are known it is quite easy to guess the components of the third function. That is, if we follow the double signals or incongruent messages and know a person’s symptoms, it is quite easy to guess the content of their dreams... and so on.

Processwork is descriptive rather than proscriptive. The goal is to describe all that is happening at each moment, as accurately as possible. The fundamental tool is amplification, which occurs either by increasing the strength of the signal or not allowing the signal to be sent by inhibiting its movement.

Processworkers often work with the families of children or adolescents who have been labeled as the identified patient. In doing so they attempt to identify the various family roles and edges and to identify the disturbing elements without polarizing against them. Processworkers pay particular attention to family relationships and the atmosphere and field within which they occur. At times they may make use of re-framing strategies or interventions. They demonstrate a commitment to deep democracy, that is, a feeling or attitude that all people, feelings, experiences, dreams and spirits are valued and need to be known. A family is a special kind of group with an ongoing stability and balance which needs to be respected and understood within a meaningful context.

Processworkers often refer to group work as “world work” and focus on the interactions between members in large groups consisting of hundreds of members. The concepts discussed above apply to groups as well as individuals, couples and families. We might ask ourselves, what is the primary process of the group? What processes are more secondary? In which channels of information processed? What are the group hot spots or edges? Hot spots are very intense moments. Groups

often have a tendency to change the subject and go in a different direction when hot spots occur. Another concept that is important in process oriented group work is thinking in terms of fields. The field makes a pattern and everything in that pattern is part of that field. Many myths portray the field as an anthropomorphic figure, which is awakening and has a mind of its own. The field manifests its wisdom when it is made conscious, i.e., when all its parts are represented and appreciated and when group edges are recognized and investigated. A Processworker involved in group work might also ask what roles or time spirits are present? Time spirits are different roles in the overall global field. They are found throughout the world. Examples are poor and rich, man and woman, minority and majority. Which roles are present but not expressed (ghost roles)? What parts of the group are disavowed? What seems like it is about to happen?

Obviously there is much more to Processwork than I have described in this brief introduction. Please refer to the bibliography for further recommended reading. Hopefully, the reader does have some sense of the fundamental concepts of primary and secondary process, channels, edges, the dreambody and amplification. At this point, I would recommend that you take advantage of the next opportunity to see and/or experience Processwork in action and observe the application of these theoretical constructs in a real-life setting.

A good traveler has no fixed plans  
and is not intent upon arriving.

A good artist lets his intuition  
lead him wherever it wants.

A good scientist has freed himself of concepts  
and keeps himself open to what is.

Thus the master is available to all people  
and doesn't reject anyone.

He is ready to use all situations  
and doesn't waste anything.

This is called embodying the light.

What is a good man but a bad man's teacher?

What is a bad man but a good man's job?

If you don't understand this, you will get lost,

however intelligent you are.

It is the great secret.

-Tao Te Ching

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## Processwork Vocabulary

- Consciousness:** (Webster) 1. The state of awareness. 2. The totality of experience at any given moment, as opposed to mind, which is the sum of past consciousness. 3. Awareness of acts, activities, and reactions. 4. The subjective aspect of neurological activities. 5. Self-knowledge; self-awareness
- Consciousness:** (Mindell) The ability to observe parts of the consensus reality and parts of dreams and to understand these parts as aspects of yourself.
- Dream:** A more or less coherent train of imagery and ideas occurring during sleep, or in drugged or hypnotic conditions.
- Enantiodromia:** (Jung) The play of opposites; the theory that everything eventually goes over into its opposite.
- Homeopathy:** A system of medical practice that treats a disease especially by the administration of minute doses of a remedy that would in a healthy person produce symptoms similar to those of the disease.
- Hormic Psychology:** A system of psychology advocated by William McDougall (1871-1938), whose fundamental assumption was that behavior is characterized by purpose, or a tendency to seek goals. Basically, goal-seeking behavior is motivated by propensities that are instincts or sentiments. Instincts are innate propensities, such as flight, curiosity, pugnacity, reproduction, acquisition, and self-assertion. That is, all instincts have a sensory, a motivational, and an emotional component.
- Marginalization:** Something takes what was in the center of your awareness, such as frustration or tiredness, and places it in the “margins” of your focus, thereby ignoring it.
- Mind:** The set of cognitive faculties that enables consciousness, perception, thinking, judgement, and memory--a characteristic of humans, but which also may apply to other life forms.
- Parapraxis:** A general term for minor errors; slips of the tongue, mistakes in writing, motor movements, forgetting things, and small accidents. Freud called such phenomena the “psycho-pathology of everyday life” and attributed them to unconscious motivational forces.



**Sentient:**

(Mindell) The automatic awareness of subtle, normally marginalized experiences and sensations. Everyone is sentient, and according to some Buddhists and most Aboriginal people, everything including stones and trees, is sentient as well.

**Teleological:**

1. Pertaining to ends or purposes. 2. Pertaining to the doctrine of teleology, which holds that behavior should be studied from the point of view of its purpose. See also, HORMIC PSYCHOLOGY

**Unconscious:**

1. Characterizing an activity for which the individual does not know the reason or the motive for the act. 2. Pertaining to the state of an individual who has suffered a loss of consciousness, such as a person in a faint or a coma. 3. Pertaining to all psychic processes that cannot be brought to awareness by ordinary means. 4. The region of the mind that is the seat of the id and of repressions.