**SHIFTING THE ASSEMBLAGE POINT:**
**TRANSFORMATION IN THERAPY AND EVERYDAY LIFE**

A dissertation submitted to the Union Institute
in partial fulfillment of the requirements
for the degree of Doctor of Philosophy
in Psychology

**Salome Schwarz**

Portland, Oregon
April, 1996

**TABLE OF CONTENTS**

1

## Abstract

This study introduces the concepts of the assemblage point and shifting the assemblage point and demonstrates them from the perspective of process work (process-oriented psychology) as developed by Arnold Mindell and his colleagues. The assemblage point consists of a person's identity and sense of reality and defines what he/she perceives and how he/she conceptualizes it. An individual's assemblage point is usually supported by consensus reality; however, at times it is important for people to open up to other assemblage points, other viewpoints and other dimensions of reality.

The idea of an assemblage point and the possibility of shifting it is inspired by shamanism which values different states of reality. Shamanism offers a context where ordinary and non-ordinary experiences are valued, including a sense of the spirit, transpersonal experiences and a love for nature which have not historically been a focus in many psychotherapeutic systems. In this dissertation, I focus on translating these attitudes in order to understand certain dynamics that happen in the context of psychotherapy. Rather than focusing on normalizing irrational experiences, which can leave people feeling alienated, unusual experiences are explored as catalysts for personal transformation.

This dissertation uses the methods of process work to explore a new approach to how people relate to irrational experiences and forces.

2

My work has been particularly influenced by Mindell's explorations of shamanism, which I have applied to therapeutic interactions. Two transcribed case examples illustrate how difficult it is to explore non-ordinary sensations and impulses and to open up to the alternate viewpoints and feelings that lie behind these experiences. Both cases demonstrate that shifts of assemblage point can occur naturally and often emerge when people explore their body sensations and impulses. In addition, the dissertation illustrates how shifting the assemblage points of both therapist and client can deepen clients' therapeutic experiences.

## Concerning the Use of Language

I will use gender specific pronouns in the following way: Unless the discussion involves a specific woman or man, I will alternate between using she/her and he/him when referring to individuals.

# CHAPTER 1: INTRODUCTION

*It doesn't matter where we walkabout, it's there! When we walk by a tree, that tree has this power-Wayrrull. We can see that tree because its Wayrrull, its power, contacts our eye. Wayrrull lets that tree talk to us. It tells us its story, that tree. The Wayrrull lets us hear. Out of the Wayrrull we get understanding. We learn from it. It guides us.*

*That's my job, helpin' people remember. Help 'm remember the mystery.*
                                        *David Mowaljarlai*


Realizing that everything is a mystery and connecting with realms beyond the threshold of ordinary awareness are ancient quests which have been cultivated in shamanism, meditation, and transpersonal psychology. Process work (process-oriented psychology) offers a methodology for expanding people's awareness and experiential reality. My research is concerned with the spiritual dimension of process work methodology. It focuses on people's struggles to open up to an alternate and more inclusive sense of self and discusses how such shifts of mind emerge naturally. Most people tend to resist dramatic changes because such shifts often go beyond consensus reality beliefs. Even when one wants to make a shift, one often can't without the help of drugs, because a true shift involves the breaking down of the old identity or personality, which can be an agonizing process. As a result, many people hang on to the status quo in their lives, to fulfilling expectations defined by society and upbringing.

4

This study will explore people's shifts of mind in the context of therapy and the circumstances that lead to these shifts of viewpoint. It focuses on shifts which encourage people to go beyond who they think they are and what they are supposed to do or be. Two case examples will illustrate how both the therapist's and client's shifts of mind deepen the client's therapeutic experience. The first case study includes an out of body experience and the mysterious interface between the therapist's and client's experiences. The second case study is a detailed exploration of the experiences of a client with suicidal ideation. This case illustrates the experience of "hitting the lowest point," a seemingly insurmountable impasse, and the transformation that follows for this individual and the therapist. This dissertation will explore how people shift their state of mind and sense of identity and how they relate to unfamiliar, difficult, non-ordinary and irrational experiences. The case examples demonstrate how shifts of mind can occur as peak experiences and traumatic or difficult moments and how they can happen suddenly or over time.

My journey started with a dream in which a voice told me that the first of three tasks in my life is to study shamanism. In a succeeding dream I was on the top floor of a skyscraper. An earthquake shook the building and flames came into the door. A voice to my left said that the first lesson was to stay aware through death. I woke up before the flames destroyed me. I couldn't face my death.

This dream posed many questions: What do we encounter as we realize the presence of death? What is involved in dying to our ordinary mind and finding a moment of lucidity? What do we need to expand our awareness and to, possibly, unravel apparitions, sensations, and realizations which take us beyond what is happening to us? How does the therapeutic interaction advance such processes? Through my investigation I hope to increase awareness of the moments of chance when the door to another reality opens. In particular, I'm interested in recognizing these moments in everyday life and in the context of psychotherapy.

**Definition of the Shift in Assemblage Point**

My research focuses on a specific type of shift in awareness which I am calling a shift of assemblage point. The term was coined by Castaneda (1987) in his accounts of his apprenticeship with the Yaqui shaman, Don Juan. The kinds of shifts I explore are inspired by Castaneda's explorations of alternate realities. The methods, attitudes and outcomes associated with shifting the assemblage point vary. For example, shamanic initiation practices may inspire a direct experience of spirit forces in nature, and Buddhist meditation may lead to a sense of detachment. Life itself offers moments where people's perception of their bodies and reality changes. I will investigate the possibilities of shifting the assemblage point and exploring alternate realities in the context of everyday life and therapy.

Mindell (1993) defines the assemblage point as "the way you identify, assemble and conduct yourself and your sense of reality" (p. 6). Thus, the assemblage point arranges the perceptions and experiences a person focuses on, the flow of information and energy she elicits and, based on that, how she constructs her identity and reality.

For the purpose of this dissertation I define a shift in assemblage point as a moment which involves an expansion and shift of awareness and attention towards more congruence, which means towards an increased alignment with non-ordinary, non-egocompatible perspectives and aspects of ourselves. It produces a variation of our ordinary state of consciousness, also called "discrete state of consciousness" (see Tart 1983 and 1989, pp. 191-192), or an altered state of consciousness.

A wide range of experiences can lead to a shift in assemblage point. Many people experience such shifts near death, or during "out-of-body" experiences, where one's state of awareness is radically different than in everyday life. At other times, people may experience a shift in assemblage point during meditation and spiritual practices, active imagination, peak experiences of many types, drug trips and fevers or other illnesses. This dissertation will show that the tendency toward shifts in assemblage point actually occurs quite frequently during daily life.

One can understand the shift in assemblage point from different points of view, and various researchers explain such shifts in different terms. For example, in shamanism, transpersonal psychology and consciousness research people discuss ordinary versus non-ordinary or altered states of consciousness. Tart (1975) also talks about ordinary consciousness and consensus reality versus altered states of consciousness and altered realities. In addition, he discusses consensus trance as the consensual validation of reality and the difficulty of opening up the mind to other worlds. Mindell (personal communication, Spring 1995) points out that consensus reality is a rather unconscious agreement with what is commonly considered as real, valid and normal.

## Shamanism

All over the world different practices have been developed around the quest of shifting the assemblage point. Innumerable practices aim at guiding people to undergo a process of dying to their ordinary state of mind and perception of the world in order to align themselves with the larger forces behind life. Since earliest times, shamans and indigenous healers have searched for insights about life and death through living in close contact with nature and the earth and through directly experiencing the natural and irrational forces emerging from it. They relate with the great spirit which speaks through visions, voices, ancestral appearances, plants, animals, and stones. Lame Deer, a Sioux medicine man, recounts:

> Being a medicine man, more than anything else, is a state of mind, a way of looking at and understanding this earth, a sense of what it is all about.... You know I am not better and wiser than other men. But I have been on the hilltop, got my vision and my power; the rest is just trimmings. (1972, pp. 157-158)

Lame Deer also speaks about the unique shamanic way of seeing. He says that: "What you see with your eyes shut is what counts" (p. 155). This point of view is not the same as the views when people are in a consensus trance (Tart, 1989). Most people in Western culture are trained to count as valuable only external, empirical information measured with the outer senses. We learn to value what is seen with the eyes open, i.e., what is visible, rational, sane. In accord with this, we are trained to ignore those things that happen with the "eyes shut", i.e., dreams, strange flickers of perception, meditative states and imagination.

Shamanism offers another crucial aspect to shifting the assemblage point. Shamans use their knowledge to heal people and their communities. Fools Crow stresses that "curing a single individual is only important in terms of what it teaches the entire community (1991, p. 38)." The basis of this work is the ability to hear, see and feel vital, creative, spirit-based forces and to live in accordance with them. Fools Crow describes how he gets rid of all the obstacles inside himself:

> First I thought about all of the stumbling blocks about me that can get in Wakan-Tanka's and the Helper's way when I want them to work in and through me. Then I asked them to remove these things so that I am a clean bone. They did this, and as I felt the obstacles coming out I grabbed them and threw them

away. When all of this was done I felt fresh and clean. I saw myself as a hollow bone that is all shiny on the inside and empty.... I knew then that I was ready to serve Wakan-Tanka well, and I held up my hands to offer my thanksgiving and to tell Him how happy I was. (1991, p. 35)

Shamanism has been practiced worldwide since ancient times, and its practice varies greatly around the world. Shamanism is a term created by anthropologists to group disparate experiences and functions, and shamanism is thus a vague concept in anthropology. The definition of shamanism continues to be debated among researchers. The types of altered states experienced by practitioners, the cosmological metaphors, and the functions a shaman holds within a community vary widely. Typical functions include healing, spiritual and community leadership and mediation between the sacred and the profane. Typical shifts of assemblage points vary from possession trance to visionary journeys.

A common element in all types of shamanism is that a healer or spiritual leader experiences phenomena which lie outside of ordinary reality and uses these experiences to heal and guide individuals and communities and to fulfill needs which are not otherwise met (Heinze 1991). In this study, I will focus on one important aspect of shamanism which parallels process work, namely the need to access experiences outside of ordinary reality and to allow such experiences to become a part of daily life. I see shamanism as a framework and means to assist individual transformation and cultural change. This is a working definition

only, and does not come close to capturing the deep feelings of mystery and honor for the spirits involved in shamanic practice. Shamanism will be discussed in more detail in Chapter 3.

## Shamanic Elements in Psychotherapy

I am translating a number of specific elements from shamanism into psychology; extreme experiences and being at the mercy of unknown forces, trances and out of body experiences, the connection between healer and client and community, love and respect, and ego-death and confrontations with death. Each of these elements appears in some form in psychotherapy and process work. Extreme experiences appear in the forms of hopelessness, suicidal ideation and attempts, and substance abuse. Love and respect often emerge in the transference and countertransference between client and therapist. Trances are common experiences for both therapist and client. The connection between therapist and client or community shows up in dreams, synchronicities, boundary issues and the mysterious ways in which people choose particular therapists. People's relationship to death emerges as an aspect of death and rebirth experiences and when facing one's mortality. I am choosing to use a shamanic framework to bring these points into psychotherapy because it allows us to see such experiences as useful rather than as pathological.

My theoretical base for bringing these elements into clinical work with clients comes from process work. A basic theoretical premise

of process work is that people's experiences are organized by a larger pattern which appears in all aspects of life. Thus, process work perceives experiences which are usually seen as disturbing, such as trances, as potentially useful when explored sufficiently to discover the pattern behind them. Process work also includes a theory of altered states (Mindell 1988, 1989a, 1993) which makes it easy to adapt shamanic views on altered states to process work practice. Finally, process work is a relative theory which observes how we relate to our experiences, rather than a structural theory which orders experiences on a hierarchy.

The aspects of shamanism which I will translate into process work will show that certain aspects of the methodology of process work parallel theories in shamanism. For example, the process work concept of "second attention" (see chapter 2, clarification of concepts) recommends an increased awareness of non-ordinary experiences. Second attention can be used to focus on and explore experiences such as trances, which are key components of shamanism. I hope to show how shamanism and process work provide frameworks to treat experiences such as trance as opportunities to shift one's assemblage point rather than as pathology. I will illustrate the application of Mindell's explorations of shamanism in a psychotherapeutic setting.

**Process Work**

Process work, as developed by Arnold Mindell, applies and expands certain concepts which are valued in shamanism in order to address contemporary life and the issues posed by living in cities and technological cultures. Process work honors the interconnectedness of everything. It honors the mysterious forces in nature and the universe and people's irrational and intuitive experiences. These notions are applied to the areas of working with dreams and body symptoms, altered states, relationship conflicts and social issues. The interconnectedness between experiences in these various areas is also investigated. In shamanism the interface between these areas has traditionally been realized.

Practical work has made apparent that some aspects of shamanism try to emerge naturally in people's experiences, in the form of flickers in our vision, unrealistic perceptions of voices and spontaneous body sensations. Such experiences are called "double signals" in process work. If double signals are unfolded with precision and on their terms, invisible threads which pattern our experiences become visible. Mindell (Summers 1994) sees process work as

> the work of bringing out this dreaming field into everyday reality, into the here and now. Thus, the shaman's quality in us has a huge role to play, but you needn't operate like a shaman to do it. You can do it by listening to people, and by focusing on the double signals that are happening.... There is also the precision and accuracy required of science. (p. 184)

Learning to recognize and unfold double signals might seem easy. In fact, it is a complicated task because our awareness is trained to

13

filter out double signals in order to preserve our momentary identity which includes, for example who we think we are and what we think is real.

In order to tap into the non-ordinary dimensions of our existence, which are called the "dreaming process" in process work, we need to loosen the grip of our momentary identity and our identification with ordinary reality. Mindell explains how this is a big part of his work:

> I'm doing the same thing all the time. I'm learning how to open up my own mind so that my virtual reality is other people's worlds. Then I can help them unfold their worlds.... I notice when I don't understand something and when I feel uncomfortable. Then, I work on myself. I ask myself, "Why is it that I'm uncomfortable with this person? Where do I have to grow with this client? Where am I blocking their reality? I study myself first and then I study the client.... Working with people is a deep meditation for me, in which something in me dies and something else opens up to what is happening. (1993a, pp. 19-20)

Process workers and shamans have developed unique methods to further themselves and others in expanding attention and attaining an empty mind in order to open up to unfamiliar, transpersonal experiences which are the seed for individual and community development. In this process people go beyond their ordinary discursive mind and their culturally conditioned perception of the world (Halifax 1988).

Process work and shamanism both change the traditional psycho-therapeutic paradigm. Healer and patient, therapist and client are

14

not perceived as isolated individuals. Rather, their experiences and interactions are patterned by the process they are working with (Goodbread 1985). Thus, the client, as well as the therapist can find herself in the position of noticing and embodying different aspects of the process. Shamanism and process work recognize that a therapist or healer may be able to access missing pieces to understanding a client's process by focusing on his own experiences.

Contemporary approaches in psychotherapy and counselling often assert that the therapist needs to refrain from bringing her experiences into the therapeutic interaction. Process work, on the other hand, observes that the therapist sometimes serves as a channel for disavowed experiences. Mindell (1993) concludes:

> In contrast to shamanism in general, the process worker shares responsibility for perceiving special states of consciousness with clients and tries to encourage them to develop their own second attention whenever possible. In process work, "following a process" depends on the client's state of awareness as much as it does on the therapist's awareness. Both need to develop their second attention. (p. 24)

This means that process work takes a special approach to the therapeutic interaction. Both the client and the therapist are involved together. In a way, they share the same task; both are called to deal with the process at hand.

It is the ethical responsibility of the therapist to make everything as useful as possible for the client. This involves recognizing how the client's wisdom and awareness is showing the

15

way and respecting the client's verbal and non-verbal feedback, for example, slight hesitations in the client's response. Another unique aspect of this type of therapeutic relationship is that the therapist must utilize her own irrational experiences in the interaction with the client if the client experiences them as useful.

The notion that disturbing and irrational experiences are potentially meaningful, whether they occur in the client, the therapist, or everyday life, has been buried by a materialist culture that is more interested in success, money and power than in allowing people to explore the their wholeness. While every culture has ancient roots in shamanic traditions, industrialized civilization in particular has fought and still fights violently to overcome indigenous thinking. Industrialized cultures encourage people to overcome nature and to run after other things rather than to recognize that our present experience is a catalyst for recognizing the spirit in the moment. Those of us who come from these cultures learn to curtail our irrational experiences, to adapt to mainstream consciousness, to medicate our bodies, and to punish deviant behavior. Alienation, depression, drug addiction, violence and oppression are the results. They dismantle the intentions brought about by our egos and culture, hypnotizing us to adhere to a pseudo stability.

It is against the backdrop of industrialized culture that I will investigate my own and people's shifts of mind. Some (1994) points out:

> In the face of all this global chaos, the only possible hope is self-transformation. Unless we as individuals find new ways of understanding between people, ways that can touch and transform the heart and soul deeply, both indigenous cultures and those in the West will continue to fade away, dismayed that all the wonders of technology, all the many philosophical "isms", and all the planning of global corporations will be helpless to reverse this trend. (pp. 1, 2)

The transformation of deep-seated feelings we have towards ourselves and other people is an important aspect of working with personal and global issues and often involves a change of heart and mind.

## CHAPTER 2: RESEARCH COMPONENTS

> *Everything I know I learned by listening and watching.*
> *Nowadays people learn out of books instead. Doctors study*
> *what man has learned. I pray to understand what man has*
> *forgotten.*
> *Vernon Cooper*

## Research as a Path

My definition of a shift of assemblage point leads us to the frontier in consciousness research. The big question is: How can we study awareness? Objective science studies reality by looking at it from an outside perspective and describing it in an autonomous medium, namely in mathematical terms. When studying the ability to be aware of something, awareness is not only the object of study but also indispensable as a means for studying itself. Awareness is considered an aspect of consciousness (Tart 1989). Some researchers focus on the physical basis of consciousness (Rose 1976). Others postulate differentiated concepts about the interaction between mind and matter (Pribram 1986, Popper and Eccles 1977). Tart (1989) asserts that "our basic ability to have experiences, to know that we are, to be aware of things, has never been satisfactorily explained in terms of anything else.... We can be aware: That is an axiom" (p. 194).

There are diverse states of heightened awareness, such as the tranquil state of meditators or the aroused state of shamans. The process of becoming aware is experienced differently by people depending on the person, the cultural context and the spiritual

tradition. We can study the measurable changes which accompany shifts of awareness, i.e., in physiology, behavior, ability to act deliberately, content of visions and sensations. We can study enlightened people and the hindrances and outcomes encountered on the paths they suggest. We can study intellectual, symbolic and mythologic understanding gained from states of heightened awareness. In practice, these perspectives can be a guide as well as a trap insofar as rational understanding alone may keep us from the awareness of the immediate experiences as they are happening. For example, the case material will demonstrate repeatedly the struggle between intellectual understanding of and an awareness of experiences as they occur.

This problem also occurs in research. For example, in the literature about shamanism the researcher frequently is unable to grasp the experience of the subject and tends to impose his conceptualizations based on his beliefs, methodology and paradigm. Grossinger (1990) points out that "investigators were almost always true to the anthropological tradition rather than to the 'weirdness.' Of each ceremony and healing event we now have only the outlines: we do not know what actually happens inside" (p. 55). This impasse is addressed by Kalweit (1988) who suggests that the more directly researchers experience the various altered states of consciousness themselves, the better they ought to be able to describe them in rational terms. He promotes the expansion of empiricism through expanding the perceptive horizon whereby the

19

researcher is not only an outside observer but also an inside participant.

Jung (1960) was aware of these problems in his exploration of the unconscious:

> There is no medium for psychology to reflect itself in: it can only portray itself in itself, and describe itself. That, logically is also the principle of my own method: it is, at bottom, a purely experiential process in which hit and miss, interpretation and error, theory and speculation, doctor and patient from a symptosis or symptoma - a coming together - and at the same times are symptoms of a certain process or run of events.... We have not, scientifically speaking, removed ourselves to a plane in any way "above" the psychic process, nor have translated it into another medium. (p. 217)

According to Jung's testimony, the only method to investigate psychic processes from the inside is to take part in them, because there is no being outside of them. That requires a basic openness or willingness to investigate the process, including the process of being closed-minded. Jung also points out that while trying to make sense of our experiences and wrestling with the limitations of our understanding we are manifestations of an underlying process. The task we face is to expose ourselves to the whole range of human experiences and facilitate their occurrence, to organize the information and recognize limitations in our understanding, and to observe the changes that occur in our consciousness and awareness.

In the tradition of Jung and in the context of heuristic methodology, my analysis of shifting states of mind does not aim at verifying but at discovering phenomena. This approach is a multi-directional process of inquiry which searches for questions,

hypotheses, alternatives, options, and answers and both creates and transcends mental boundaries and categories. All participants are invited to engage in this process.

A close interaction between researcher and subject (even if one person occupies both functions) which forms an "alchemical pot" is required if we want to follow the subtle process of the expansion of awareness. We can't study awareness without influencing the process and being influenced by it. It is well known that a researcher's consciousness has an effect on what he researches, although most scientists are reluctant to address this factor (Pelletier 1978). If they did, objectivity as a main goal of research would need to be replaced by relativism because the data gained is not totally objective but partially reflects a researcher's state of consciousness and its interaction with the subject of his research.

Proponents of various fields of research, such as anthropology, psychotherapy, and organizational development have acknowledged that purely objective research models are not feasible and not desirable when dealing with human systems, because the ethics of the research intervention should reflect the ethics of a consultant. This means that research which involves people has to benefit these people even while it is being done.

For example, in action anthropology (Tax 1951), the researcher acts as a social activist helping indigenous communities fight for their rights -- a fight which is led on the basis of the larger culture and its laws. In this way the researcher is an identified part of the system. In the context of organizational development, Schein (1993) points out that in his definition of clinical research "(a) a client wants help and is therefore more likely to reveal important data and (b) the clinician researcher is expected to intervene which allows new data about the client to surface" (p. 705). Both action researchers and organizational consultants see any measurement as the next intervention and study the system while trying to change it.

In the clinical practice of process work both perspectives are valued. At a given moment, the therapist may choose to focus either on the inner workings of a person or organization or on the external environment in which a person or organization is embedded. Focusing on the social environment is important when social discrimination requires that a person's experiences may not require attention on a personal psychological level. Generally, the feedback to any intervention reflects the direction a client's process and suggests how it needs to be addressed. Internally or externally focused perspectives require that the therapist use his insights immediately, for the benefit of the client. In both cases research becomes an interactional process between the researcher and the person or organization he is relating to.

## Research Methodology

Knowledge is both method-specific and state-specific, which means that the data gained depend on the state of consciousness of the researcher and the subject. My research follows the heuristic tradition and employs a multi-dimensional methodology which is suitable for studying transpersonal dimensions. Walsh and Vaughan (1993) point out that "transpersonal researchers have encouraged an eclectic, interdisciplinary, integrative approach that makes appropriate use of all so-called 'three eyes of knowledge': the sensory, introspective-rational, and contemplative" (p. 5). Process work methodology addresses each of the three eyes of knowledge. I will use contemplative methods through meditating on the limitations of my own awareness. I will utilize sensory information through studying video-tapes of the sessions and journal entries about my own process. Finally, I will use rational methods to analyze the material. The three eyes of knowledge operate simultaneously and influence each other all the time. The immediate interface between sensory experience, analytical understanding and reflective exploration may reflect the process of expanding awareness.

Process work itself is a methodology rather than a philosophy, because its method diverges from the method of philosophy which settles questions connected with mentality only through reflection. Process work also differs from classical science which settles questions only through observation, experiment and measurement.

Process work takes for granted the ultimate reality of experiences while not classifying then as real or unreal or in any other way. It is not interested in the ontological nature of things but the interaction with the visible and invisible processes which pattern people's natural flow of experiences.

Process work follows the experientalist approach suggested by Lakoff (1980) which transcends the conflict between objectivism and subjectivism. An experientalist approach recognizes the need to treat a person's experience and sense of reality as neither objective nor subjective but as an individual and social construct (Goodbread, personal communication, Fall 1994) which changes from person to person and from culture to culture. This implies that process work with people from different cultures and sub-cultures and people in altered and extreme states of consciousness should reflect people's virtual reality. The therapist needs to be able to shift her mind in order to do that. Tart (1989) comments:

> If we want to know all that a human can know we must study things in the appropriate consciousness.... One of the tragedies of our time is that we have forgotten about the state-specificity of knowledge in regard to many vital and spiritual questions. Thus we approach them only from an ordinary-states perspective and get answers that are distorted and pale reflections of reality. We have traded direct knowledge of the Unity of Life for abstract verbal statements and theories about unity, for example. It doesn't satisfy, and it doesn't work well. (p. 343)

In order to determine each individual's perspective on reality, process work uses sensory grounded descriptions of experiences (i.e., "I feel a dull fast pounding in the back of my head for

24

headache) and recognizes irreducible experiences whose information content would be ruined if sensory grounded experiences took the focus (i.e., "I'm hurt by what you said" needs to be addressed as a relationship process). It is not easy to verbalize how we know things and what we really feel because we are trained to stop the investigation of our personal dreaming process with a defining interpretation, for example "I'm codependent" or "I have depression."

Process work methodology uses sensory grounded information in order to help people discover the potential meaning and creative energy in disturbing experiences. Sensory grounded information hints at how to address a process. For example, if we experience depression as a weight on our shoulders we might experiment with literally placing our weight on something like a pillow and notice the intent behind this kind of force. If we experience depression as a nagging voice we might dialogue with it. Sensory information makes it possible to relate to an experience in a way that allows the individual to feel that their experience is being deepened and furthered rather than stopped or interpreted.

The methodology of process work encourages a practitioner to continually notice the most unknown or disturbing experiences because these disavowed experiences are the most likely to bring new information. The practitioner supports a client in unfolding the process by amplifying these experiences. This often involves

working with what hinders people from exploring new aspects of themselves and the world around them. Following a process means following the natural evolution of the totality of people's experience. It means allowing disavowed experiences to become more tangible and facilitating the interaction between diverse interconnected experiences and aspects of the psyche. Such work can lead to a sense of awareness of how experiences in many realms are related to each other. Through consciously relating with this evolutionary process, dreaming, or co-creation of our reality, begins (Mindell 1992).

Process work methodology is applicable to many different situations, including individual work in clinics and private practice, relationship work and family and group work. This dissertation uses two case studies. The first is taken from a training situation in which I worked in the therapist role with another student who volunteered herself as a client. The second case example comes from my work in a clinic.

I will analyze the tapes in the following way. Verbal transcripts of the tapes will be divided into sections. I will summarize those sections which either hinge on non-verbal processes or which do not significantly further insight into the nature of the process and its flow. Each section will be followed by an analysis of interactional data. In terms of the client, I will focus on: What kind of feedback does she give to my actions? What directions does

she suggest verbally and non-verbally? In terms of myself, I will focus on: Which signals do I pick up? What do I add in terms of my personal experiences and attitudes? Through focusing on these questions, I hope also to recognize the mind-set of both client and therapist and to determine at what points these mind-sets are synchronized.

I will focus on interactional data because it will allow me to observe from the outside what kind of information and change of information is and is not related to. Based on that data, I should be able to discern both my own and the client's state of mind. If I were to look only at the signals of each person I would simply discern the direction and potential insinuated by a process. It would be harder to pin-point what kind of mind set is working and relating to the experiences. Based on interactional data, I hope to recognize whether or not our assemblage points are synchronized.

## Clarification of Concepts

In the following, I will clarify terms related to expanding awareness and outline them in the contexts of process work and common sense.

### Awareness and Attention

Attention refers to the ability to focus one's awareness. By paying attention we get in touch with ourselves, other people and the world. If we focus on the flow of our experiences closely, subtle

27

patterning forces, the dreaming process, and meaningful insights can emerge.

Most of the time awareness is colored by our personalities and states of consciousness. This becomes apparent, for example, in the way we talk about what we feel, see and hear. While talking or thinking we also imply if we like or dislike what we notice and how we conceptualize it. The disposition of our awareness becomes apparent in signals such as words, intonation, feelings and movements.

## Second Attention and Metacommunication

A large amount of information never reaches our awareness because it is not attended to. Cognitive psychologist Anderson (1985) states that "attention plays a big role in selecting sensory information for further processing" (p. 40). Divided attention studies have shown that sensory input may be selected according to a dominant channel in which information appears or according to meaning. Experiments have shown that practice in shadowing experiences in non-attended channels can improve attentional limitations (Underwood 1974). In this research, shadowing what is referred to as a non-attended channel means that a person who, for example, focuses primarily on visual stimulation pays attention to physical sensations. This ability can become partially automated (Anderson 1985, p. 45).

Process work training advances the ability to track experiences which a person usually doesn't pay attention to, including seemingly nonsensical experiences. This ability is called "second attention." Second attention and awareness can be used in a focused and sharp or diffuse and relaxed way. Mindell and Mindell (1992) say that "if you are only intense and focused, you will not attract the fish you want to catch. If you are too relaxed, you will not notice the fish when it nibbles on the line" (p. 76). The fish they refer to are the experiences and behaviors most unknown to us which hold the potential of personal growth and transformation.

If we want to unravel the meaning of mysterious, illogical experiences we also need the ability to metacommunicate and to reflect on our perceptions. Metacommunication allows us to immerse ourselves in non-ordinary, irrational experiences and to observe them from a detached stance. Second attention and metacommunication prevent us from getting lost in our experiences and from solely identifying with any of them.

## Congruence, Primary and Secondary Processes, and Edges
Being congruent means that we are in alignment with the totality of our process. This includes our identity and momentary identification, called "primary process" in process work, and what is "happening to us" and doesn't go along with the sense of identity we have, called "secondary process" in process work. The step towards congruence is a big challenge. Who we think we are and

29

our personal and cultural conventions and beliefs set up limitations, called "edges" in process work, which confine our awareness and range of experience and behavior. Edges defy our attempts to face the psychological, somatic, social and spiritual forces which ask us to change and expand who we are. These forces may enter our awareness as symptoms, moods and relationship conflicts. These disturbances can be comprehended as an expression of the friction between our primary process and our secondary process, between our status quo and our potential to keep on dreaming.

Striving towards congruence requires a potential awareness of the body (i.e., sensory experiences and symptoms), dreams (i.e., night dreams, hopes and fears), other people (i.e., communication signals, social ranking), and the spirit (i.e., ancestors, ghosts, aliens, God). According to Mindell (Summers 1994), the channel or level where we focus depends on "whichever is most pregnant in the moment. There is no prescription for what to do. You've got to follow the momentary process of the individual and the group" (p. 185).

Not every change of our identity or state of mind involves an expansion of awareness towards more congruence. If we move towards rage, extreme jealousy, fundamentalism or repression, it is likely that awareness, attention and volition contract. There are times when one-sidedness is a step towards overall congruence. The

problem is that if we get addicted to any one experience, we are no longer open to following the arising process. In working with conflict, for example, it is hard to notice and follow signals and processes of escalation and de-escalation. People tend to get stuck with following either process. A shift of mind towards congruence increases openness to the immediate process and change.

## Awareness, Experience, and Metaskills

Until now I have described awareness in an isolated way. This is not sufficient because awareness is linked with a certain feeling-tone. I might perceive something from the precise awareness of a scientist, the ecstatic awareness of a mystic, the relaxed awareness of a bum, the loving awareness of an elder or the dry awareness of a warrior. The kind of awareness put forth by spiritual traditions and process work is not bland but one of compassion. Mindell (1993) says that "the skill of dreaming is second attention, but compassion for yourself and your experience are the metaskills" (p. 86).

The term "metaskill" refers to the feeling attitude we have in any given moment towards our experiences and our ability to make them useful. For example, just recently I was very upset. At the same time I noticed a strange coldness inside. I considered becoming less sentimental. This shift in feeling attitude supported me in going about what needed to be done instead of getting stuck in feeling bad about my situation.

## Ethical Issues in Therapy

While a thorough discussion of ethics in psychotherapy is beyond the scope of this research, I hope to raise some awareness of ethical considerations when working with clients. In particular, I will point out the complex interface between following ethical rules and following a client's process. The need for ethics arises when one person has more rank and power over another person, which is the case in therapeutic relationships. Because the therapist is considered an expert, a client may not be able to defend herself against a therapist who consciously or unconsciously acts in ways which manipulate or even hurt a client. Other areas covered in ethical guidelines for therapists include how to work with homicidal and suicidal clients, dual relationships, moral principles and psychotherapeutic goals, and disclosure of the therapist's experiences.

Ethical codes in process work and other types of therapeutic systems have much in common. Ethical codes in all systems, including process work, address what to do in certain situations such as touching a client, or how to deal with sexual feelings which may arise in therapy. The point of differentiation between process work ethics and many other ethical codes is that process work stresses the importance of awareness. This is not to imply that process work ethics does not include guidelines for specific situations such as how the therapist should and shouldn't address sexual feelings which may arise in therapy. Rather, an emphasis is

placed on the importance of awareness in addition to guidelines. Emphasizing rules has advantages and drawbacks, as does emphasizing awareness.

Lets look at a hypothetical situation in which a child in a residential treatment program repeatedly asks a therapist for a snack after dinner. This program, as many others, prohibits the staff from giving food to patients unless it is a designated meal or snack time. This rule generally exists to prohibit manipulation of staff and to prevent splitting the staff members into those who will provide extra snacks and those who refuse. Other advantages of such a rule may be to establish some routines and to prevent competition for receiving special treatment.

A drawback of enforcing rules without awareness is that the rules themselves may create abusive situations for the client. In the example above, the rules against extra food set up a rank dynamic against which the patient cannot defend herself. The need for times of extra care and nurturing with food and contact is devalued. The patient is forced to simply accept the expertise of the rule makers. Over time, such a setup may create a sense of feeling worthless or a need for rebellion on the patient's part. In traditional psychotherapeutic systems, this rebellion is considered to be resistance on the part of the client, but in fact the client is not at fault. The system itself creates a reaction. The way in which a therapist or staff member follows a rule is of utmost

importance and requires a great deal of awareness.

One of the advantages of using awareness to guide one's interactions is that it allows the therapist to access information and support a client's process in a way which might not be available if the therapist is guided only by rules. Process work would deal with such a situation by addressing the psychological dynamics around a patient's request for food. In many cases, it may indeed be counterproductive for the patient to have a snack, i.e., if the request is actually expressing a deeper need for an adult who can provide structure and clear limits. On the other hand, at certain times, it might be therapeutic for a person to have the extra attention that comes with getting a snack. A process worker might interact with the child and explore what kind of "snack" the child would like to have. For example, when asking for something sweet, a person may also implicitly be looking for loving attention and protection from something which is less than sweet. If the staff member is not able to also use his awareness from case to case, certain therapeutic benefits may be missed.

Emphasizing awareness as an ethical guideline also has drawbacks. This approach requires a great deal of self-awareness on the part of the therapist, but it is not equally easy to be self-aware in all situations. For example, if a client presents a problem which triggers similar difficulties for the therapist, it will likely be difficult if not impossible for the therapist to retain sufficient

awareness. For example, a therapist who has recently lost a parent or partner might have difficulty helping a client with similar issues in part because the emotions which are activated may make it more difficult to follow the specific dynamics the client is experiencing. Additionally, for awareness to be useful as a guide, the therapist must be able to track herself sufficiently to realize when she has fallen into a state of less awareness or when her awareness is strongly limited by the content of the client's problem or by her own preoccupation.

On a methodological level, the therapist who uses awareness to guide his actions needs to be able to closely track verbal and non-verbal feedback from the client. The recognition of feedback is complex and requires that the therapist know when the client is giving feedback to the general direction of the work, to the personality and metaskills of the therapist, to the timing of an intervention or to the specific intervention itself. For example, a general rule in therapy is to gain the client's verbal permission for certain interventions. However, a client might listen to the therapist's request for permission and then hesitate slightly before agreeing. If the therapist simply follows the rule to get permission, she will go ahead with her intervention at this point and possibly miss the meaning of the hesitation, which could be that the client is unable to say no.

Shamanism offers an additional dimension to ethics. Besides following culturally established guidelines or awareness of a client's process and feedback to ensure the client's well-being, shamans consult with transpersonal forces to determine the correct conduct in a particular situation. For example, Fools Crow (1991) says that he simply can't force something to go the way he wants it to because then he wouldn't have the help of the greater spirit and he would only be deceiving the client. In a fairytale by Grimm (see Mindell 1984) about Godfather Death, a physician was given the ability to heal people if he saw that Death was standing at the head of the bed. The physician twice tried to trick Godfather Death by turning the bed around when Death stood at the foot of the bed, only to be killed by Death himself. Both of these examples speak of the value of respecting transpersonal forces. Such forces can be accessed by shifting the assemblage point and going into an altered state.

Especially in the context of shamanism, ethical behavior and the establishment of individual and social guidelines emerge from a conscious interaction with transpersonal forces. This requires a great deal of awareness and training as well as an openness to honor viewpoints different from ordinary, individual concerns. I mention the transpersonal aspects to ethical behavior because the second case example will demonstrate how a therapist's shift of assemblage point and her realization of the larger forces at hand had a beneficial effect on the therapeutic interaction and the

client. Information from transpersonal experiences of the therapist and client may expand ethical rules into deeper more profound ways of behaving.

## Literature Review

This study focuses on moments of heightened awareness as they happen organically and naturally in the context of psychotherapy. The case studies will demonstrate that through focusing on exploring their experiences, people will spontaneously find moments of great lucidity. In the following I will refer to shamanism and several Eastern traditions because these traditions have a long history of honoring the natural human tendency to open up to the immediate realization of nature and the spirit. They emphasize mindfulness and respect for nature as part and parcel of change and thus contribute to Western psychology which has not focused much on such issues.

At this point, I will give an overview of how the issues of shifting the assemblage point have been addressed. Psychotherapists have been interested in change, but many schools of psychotherapy have not put a lot of focus on the concepts of expanding attention and accessing non-ordinary dimensions of reality. While adaptation to common sense reality is highly valued, people's experiences are often pathologized. However, several psychotherapists of this century have paved the way for the current interest in diverse states of mind.

While various theorists, such as James, Eliade and Rank, have studied transpersonal and spiritual experiences from philosophical, anthropological and psychological points of view. I am limiting this literature review to psychotherapists who have attempted to develop and apply methods for working with non-ordinary experiences in clients. With the exceptions of Jung, Mindell and Grof, few psychotherapists have studied transpersonal experiences and also developed a coherent, extensive methodology which allows for the natural emergence and recognition of non-ordinary experiences.

Freud (1920) discovered and studied unconscious processes scientifically. Through introducing the concept of the unconscious, he was the first to postulate scientifically an alternate to conscious will and understanding. His theory of the unconscious as repressed aspects of people's conscious reality supports a pathological view of alternate realities. Jung (1959, 1960) expanded Freud's notion of the unconscious and discovered the transpersonal and collective dimensions of people's experiences. He was one of the first psychotherapists to view psychic processes as real and to discuss the emergence of awareness and the process of entering the stream of experience. Humanistic psychotherapists opposed a pathological view of human nature and studied people's tendency towards self-actualization and personal growth. Transpersonal psychotherapists went one step further to study altered states of consciousness. Grof, for example, has developed a method which helps people shift their state of mind and access

38

experiences which go way beyond their personal biography (1993).
Mindell expands Jungian, humanistic and transpersonal concepts and
explores the interface between shamanism and psychology in everyday
life (1993). He emphasizes increasing awareness of irrational
sensations and impulses, heartfulness to let the invisible forces
become visible and openness to conflict between ordinary life and
irrational forces.

Maslow (1968) studied the nature of and people's cognition of being
in peak experiences. While he viewed peak experiences in the
context of personal development, he offered few insights about
facilitating the struggles of getting there. Differently, Assagioli
(1965), the founder of psychosynthesis, while affirming the
spiritual dimension of life, promotes the development of will and
the systematic use of eclectic techniques and exercise. The
implicit directiveness of his approach might be detrimental to
truly opening up to reality as it is. Perls (1973), the founder of
Gestalt psychotherapy, studied the flow of awareness, but did not
develop a method which could take awareness into non-ordinary
realms. Erickson (1981), who pioneered the use of hypnosis in
psychotherapy, used the non-ordinary state of hypnosis to
facilitate change. The difference between his approach and what I
am focusing on in this study is that Erickson's goals are
determined by cultural and personal norms. Rather than exploring
the meaning of a symptom or disturbing behavior, his method uses
non-ordinary states as a means to achieve the goals put forth by

ordinary consciousness.

The conclusion is that few Western psychotherapies have presented ways to enter the stream of experience beyond the threshold of ordinary consciousness. They offer few insights into the hinderance encountered. Some Eastern and indigenous traditions can fill this gap. Certain Eastern and indigenous traditions don't aim at getting rid of disturbing experiences and sensation in order to adapt to consensus reality. Rather, they aim to see right through them in order to realize the basic nature of life or the spirit behind it. At the core of these traditions is a devotion to mindfulness and to honoring nature which is a central aspect of shifting the assemblage point.

The various Eastern traditions cultivate distinct states of mind, such as a direct experience of the suchness of things (Suzuki 1955), the realization of the natural mind (Sogyal Rinpoche 1992), or the merging with the ki-energy (Ueshiba 1984). While many Eastern traditions ultimately facilitate a detachment from affects and the ordinary perception of the world, they rest in a mindful focus. They emphasize people's ability to distinguish clearly whatever they experience and support them to realize everything as a potential catalyst for enlightenment and for harmonizing the universe. For example, in regard to strong emotions such as anger, desire and jealousy, "the great secret of Dzogchen is to see right through them as soon as they arise, to what they really are: the

vivid and electric manifestation of the energy of the Rigpa itself"
(Sogyal Rinpoche 1992, p. 161).

Several Western practitioners have explored the interface between
Eastern spiritual approaches and Western psychotherapy. Wilber
(1986) found that psychological approaches help people to manage
lower stages of the development of the mind while Eastern
traditions facilitate the development of higher stages of the mind.
Welwood (1983) explored how Buddhist meditation adds a new
dimension to existential psychology. While the latter tries to fill
the void that opens up when a person's sense of the world
collapses, the former provides a way to enter the emptiness and to
let go of the need to be something. In the therapy setting, Welwood
found that allowing people to explore their sense of vulnerability
behind facade, ego, and shell helped them connect with a basic
aliveness that can shift their perception of problems. Contrary to
Wilber's hierarchical and developmental synapse between Eastern and
Western concepts of personal development, Welwood recognizes their
co-existence in working with people.

Podvoll (1983, 1990) addresses the immediate interface between
psychological and contemplative practices. Inspired by his Buddhist
practice and studies, Podvoll has developed a unique approach to
psychotherapy and psychiatry. He focuses on people's history of
sanity, the moments of lucidity and dignity. Subtle sensations and
mundane actions can be recognized as a natural gateway to

wakefulness and as a prototypic pattern for working with one's state of mind. For example, compassion is present if a despairing and suicidal person cares about the therapist, or discipline is present if a depressed person regularly feels accomplished after practicing swimming. Instead of supporting the cycle of egoic self-justification, Podvoll supports the moments of wakefulness and the oscillation between different states of mind. The conclusion is that the study of Eastern traditions can add to Western psychotherapy, first through introducing the notion of shifting the assemblage point and then through providing insight into how to encourage such shifts.

While Western psychotherapy and Eastern spiritual traditions offer a wide range of texts which have been written by experienced practitioners, this is not the case in the study of shamanism. Most reports have been written by Western researchers who have not gained an experiential understanding of shamanism. As a result, there is a wide variety of ethnocentric interpretations which lack experiential descriptions of shifting the assemblage point. While both shamanism and Eastern practices are quite foreign to the Western mind, it seems that the Western mind can relate to certain aspects of Eastern traditions, for example the recognition of Buddha as an enlightened being or the philosophical discussion on the ultimate ground of reality. The Western mind seems to take a more adversarial stance towards indigenous practices. Shamanism honors non-ordinary experiences and physical manifestations as an

expression of the spirit and is not aimed at overcoming nature. Such notions defy Christian and Judaic ideas and scientific thinking which postulate God and reason above matter.

The research on shamanism does not address the shift in assemblage point per se. It is relevant and interesting in part because it displays how the Western mind has responded to non-ordinary phenomena. The diverse perspectives presented throughout this century are not simply history. They come alive in the diverse ways people relate to weird sensations or flickers of imagination. Some people tend to dismiss unusual experiences as magic or crazy, while others have faith in them without experiencing them directly. Still others enjoy non-ordinary experiences as breakthroughs without enlightening themselves and their communities. Such attitudes do not further the spirit of shamanism.

At this point, I would like to give a quick overview of what has been written about shamanism. The earliest interpreters of shamanism have described it as a magico-religious practice (Rivers 1924, Clements 1932, Eliade 1951). Shamanism is referred to as an animistic religious belief system with magical ritual practices which relate illness to a violation of tabu, soul loss, or the intrusion of a foreign object. The practices, while efficient in many ways, are denounced as "archaic."

According to Langdon and Baer (1992), social anthropologists have eliminated the discussion of whether shamanism is a religious belief system or a magical practice. Social anthropologists view shamanism as a symbolic system and experience which mediates meaning and facilitates individual and social well-being, social order and change (Ackerknecht 1942, Turner 1969, Bourguignon 1976, Hoppal 1987). They are less concerned with the effectiveness of shamanic practices and more interested in the human expression and representation of guiding principles. The study of the semantics of illness has elicited how alternate perceptions of realities are linked with diagnosis (Frake 1961) and with the interaction between healer and patient (Bahr, Gregorio, Lopez, and Alvarez 1977).

Psychological theories on the nature of shamanism have been diverse. A potentially fruitful interface between shamanism, psychology and allopathic medicine has been injured by a pathological outlook on shamanism. Some researchers have greatly harmed the respect for shamans by viewing their behavior as epileptic, neurotic and hysteric. More often, the effectiveness of shamanism has been affirmed and connected to psychotherapeutic principles such as relaxation, hypnotic suggestion, explanation, catharsis, transference, physical and mental activation, ego-strengthening, group support and role play (Jilek 1974, Rogers 1982). These methods do not facilitate a shift of assemblage point. According to King (1988), shamanism goes further in that it actually creates realities as the shaman enters into a spiritual,

dreamlike realm and interacts with or influences the powers. The effectiveness of traditional medicine as it addresses body, psyche, spirit and community has allowed for the coexistence of shamanism and allopathic health care in few hospitals and in the attempt to foster primary health care world-wide (Leslie 1977, Pfleiderer and Bichmann 1985).

Most interesting to me have been accounts of a researcher's apprenticeship or acquaintance (Katz 1993, Boyd 1974) and the life stories of Native American and African spiritual leaders as told by them (Black Elk and Neihardt 1932, John Fire Lame Deer and Erodes 1972, Wallace Black Elk and Lyon 1990, Fools Crow and Mails 1991, Medicine Grizzlybear Lake 1991, Archie Fire Lame Deer and Erodes 1992, Malidoma Some 1993) and of the Native American way of life from the Native point of view (Beck, Walters, and Francisco 1990). These accounts include experiential descriptions of shifting the assemblage point, from Western to indigenous thinking and from an ordinary to a non-ordinary state of mind. They address the significance of a respectful attitude towards nature, the spirit and the larger community.

The study of shamanism lacks a coherent paradigm in part because Western thinking is at an impasse to understand that the forces governing metaphysical, transpersonal and spiritual dimensions of reality show up in peoples experiences in altered states of consciousness and influence their ordinary life. In recent decades,

academic research in the areas of dreaming, mind-body healing, consciousness, meditation, extra-sensory perceptions and near death experiences has led to a greater reverence for shamanic practices and their interface with psychotherapy (Walsh 1990, Dittrich and Scharfetter 1987, Kalweit 1984, Katz 1982). Krippner and Villoldo (1976) recognize that spiritual healing pushes academic research to its limits and conclude that "when science studies the 'healing process,' it will find that coherence is lost if only the physical or the psychological data are examined. After all, nature and the whole are not organized the way science is subdivided" (p. 287). Mindell cuts through the division of nature by focusing on the coherence of human experience.

The next chapter will further explore the ethical implications of research into shamanism, provide a description of shamanism, and offer experiential accounts of shamanistic healers and the shift of assemblage point according to don Juan.

## CHAPTER 3: SHAMANISM

*All our ceremonies, a sweat or a vision quest, end with the words "mitakuye oyasin"-"all my relations"-and that means every living being on this earth, down to the tiniest bug or flower. Everything that lives is related.*
*Leonard Crow Dog*


Shamanism is the most ancient tradition that is interested in shifting the assemblage point and opening up towards dreaming or non-ordinary reality. My research is inspired by shamanism's ability to shift between different states of mind and to work with the intensity of the process of opening up to altered and non-ordinary states. My research is additionally inspired by shamanism's feeling attitudes towards life, which include honoring the earth, patience and spiritual warriorship. A basic feeling attitude and means of shamanism is love, which includes love for the spirits in all things, including animals, rocks and plants. Love for nature makes the shaman hear the voices in the wind and feel the presence of the spirit everywhere. Love pulls the shaman to search for a vision for the good of the larger community. Love leads the shaman to treat the spirits with care and respect: without special treatment, the spirit may disappear for a long time.


Shamanism and science are connected. Western science, especially physics, is close to recognizing the existence of a dreaming element in the universe and of parallel realities linked to consciousness (Mindell, class, 1995). Every shaman is a scientist

47

in the area of awareness insofar as she needs to survive the onslaughts of unknown, non-ordinary experiences. In the following discussion I will first state some ethical considerations, then review research done by non-indigenous people in the 20th century, and finally report on salient issues portrayed by indigenous healers.

## Ethical Issues in the Study of Shamanism

Though I'm well intentioned and will write about my personal feelings and thoughts inspired by interactions with Native people and by readings, I nevertheless have to be aware of the impact of my research on indigenous cultures. I do not want to support cultural imperialism through making assumptions about or inaccurate descriptions of shamanism due to my own non-Native cultural background. Minimal reference to the historical and present interface between indigenous and cosmopolitan communities, including genocide and adoption of Native spirituality, will serve as a necessary background to appreciate the significance of continuing more subtle forms of exploitation.

Industrialized cultures have done a lot of harm to shamanic ways of acquiring knowledge. Indigenous cultures and the practice of shamanism have been subdued, especially over the last five hundred years (Lazarus 1991, Nabokov 1992, Jaimes 1992). In Europe, in the name of Christian and scientific patriarchical knowledge, shamanic practices were wiped out during the middle ages and thousands of

women were burned as witches. Colonization and Christian missions have done irreversible damage to indigenous cultures since. Certain Native American practices were prohibited in the 1880s and remained illegal until the passing of the American Indian Religious Freedom Act in 1978.

In other parts of the world, shamanic practices have been integrated into the dominant religion. In Tibetan Buddhism, the practice of heightened awareness and dreaming is well recognized, and the Dalai Lama, for example, consults with an oracle (a trance medium) when making decisions. In Asia, Africa and Indonesia shamanism coexists with other medical and spiritual practices, all of which influence each other. Yet still, all over the world, genocide and the depreciation of shamanic practices continues.

In the West in particular, a neo-shamanic movement (Townsend 1988) responds to the disenchantment with the Western script of reality and revives the recognition of spirit forces and alternate realities. In the context of the neo-shamanic movement, people imitate traditional practices or conform and integrate them into their lives. While the people interested in neo-shamanism embrace alternate views of reality, they usually follow an eclectic approach and are frequently not affiliated with any long-lasting organization or community (Townsend 1988). I wonder if perhaps our interest in indigenous cultures is an escape from dealing with the problems of our communities and the suffering of less privileged

people, especially if we don't focus equally on learning to communicate with our neighbors around the corner and in the streets.

The American Indian poet and anthropologist Rose (1992) talks about the cultural imperialism which happens when non-Natives claim to be shamans or define the real manifestation of shamanism. She has experienced many times how non-Native academics claim to know more about Native traditions then Native people themselves. She says that "Native reality is thereby subsumed and negated by imposition of a 'greater' of 'more universal' contrivance" (p. 405). She explains further that this is a part of "a much broader assumption within the matrix of contemporary Eurocentric domination holding that non-Indians always know more about Indians than do Indians themselves" (p. 406).

Exploitation happens not only in the academic context. Smith (1994) voices concerns with the New Age movement which doesn't recognize that the strength of Indian spirituality has kept the spirit alive and people bonded while resisting genocide and that Indian religions are community-based and reflect the needs of a particular community. Without this realization, there cannot be a genuine interest in understanding Indian spiritual practice. Her voice wakes us up to what gets in the way of Native women aligning themselves with white feminist women while her statements are equally appropriate for intercultural relations in general:

> When white "feminists" see how white people have historically oppressed others and how they are coming very close to destroying the earth, they often want to dissociate themselves from their whiteness. They do this by opting to "become Indian." In this way they can escape responsibility and accountability for white racism.... Rather these New Agers see Indians as romanticized Gurus who exist only to meet their consumerist needs. Consequently they do not understand our struggle for survival and thus they can have no genuine understanding of Indian spiritual practices. (p. 70)

With a sense of justified caution, Smith points out the only viable way of cross-cultural interaction:

> Respecting the integrity of Native people and their spirituality does not mean that there can never be a cross-cultural sharing. However such a sharing should take place in a way that is respectful to Indian people. The way to be respectful is for non-Indians to become involved in our political struggles and to develop an ongoing relation with Indian communities.... I hesitate to even say this much about cross-cultural sharing, however, because many white people take it to mean that they can join in our struggle solely for the purpose of being invited to ceremonies. (p. 71)

Based on her experiences, it is not astounding that the opinions within Native communities vary widely as to whether or not spiritual traditions should be open to non-Natives. This controversy is my responsibility, and I have to stay in touch with the social and political realities of indigenous people and the ethical responsibility I have when mentioning shamanism. If I were to omit reference to shamanic traditions all together, I would fail to acknowledge what I owe to them as buried yet still vital roots of my life.

While every culture has ancient roots in shamanism, the traditional forms cannot be revived in today's world because most people do not live in tribal communities close to nature. The need for shamanism, however, is still part of people's souls and frequently neglected. That's why I consider taking Mohawk's suggestion "to look at other people's ways of thinking about the world and its societies, and decide anew how human priorities and human societies ought to be constructed" (1992, p. 443). Some (1993), an African spiritual teacher, has called people who are waking up slowly to the values of nature and to respectful sensitivity the modern indigenous people, the new shamans, the repair people.

## Traces and Traits

What is shamanism? My first response is that I don't know. I only have a feeling sense for it. I have never experienced it deeply by living in an indigenous community or to such an extent that I would feel justified to say anything about it. Besides numerous night dreams, I sometimes experience nature forces and alternate dimensions of reality with surprising vividness. I need strong experiences and continuous minimal shifts of awareness to loosen up my rigid attachment to consensus reality.

My second response is that explorers, historians of religion, anthropologists, psychologists, psychiatrists, consciousness researchers and indigenous practitioners have said many things about shamanism. I have summarized these diverse perspectives in

Chapter Two. At this point, I would like to fill out the picture and outline various aspects of shamanism.

Generally speaking, shamanism is one of the earliest forms of religious and medical practice which has been and is still practiced around the world. Some neolithic cave drawings in Europe, Africa, Russia, and China (26000-15000 B.C.) have been interpreted as signs of shamanism. Shamanism has not been institutionalized, and "recalls the democratization of the spiritual experience, in which hierarchies are reserved for levels of experience rather than for priests and bishops" (Huston 1987, p. vii). It is not captured in original books of wisdom but needs to be rediscovered and directly experienced by every individual. A mentor, songs, and myths assist an individual on this path and "the path of life itself when traversed with 'an obedience to awareness' is instruction" (Halifax 1982, p. 30).

A shaman seeks knowledge of the powers immanent in nature or present in ancestral spirits. She acts as an intermediary link between two worlds while appreciating and taking part in both. Her task is to make hidden powers tangible and to listen to them and interact with them. The mediation between the sacred and the profane is part and parcel of community life. It ensures an individual's well-being, success with community endeavors and sustainable change. Traditionally, shamans act as ceremonial leaders, spiritual elders, seers, dreamers, dancers, diviners,

herbalists, bone-setters, sucking doctors, trance doctors, hand healers, spiritual healers, artists and political guides. All cultures have indigenous names for their healers and spiritual leaders. Many cultures have various kinds of practitioners, each with a limited area of authority.

The renewed interest in altered state of consciousness has led to a never-ending debate about what kind of altered state distinguishes shamanism. Some researchers stress the importance of a visionary journey or "magic flight" (Eliade 1982, Harner 1980) while others include spirit possession and spirit trance as shamanic means to relate to or enter non-ordinary realities (Lewis 1971, Bourguignon 1976, Heinze 1991). It is noteworthy that many practitioners enter a wide range of altered states during one single session (Heinze 1992, Peter and Price-Williams 1980). Some enter non-ordinary realities with the blink of an eye (King 1988).

Shamans have to tame their minds and develop controlled abandon, which links the ability to focus on powerful and unknown forces without losing awareness together with the abilities to wrestle with adversarial forces until they become allies (Halifax 1988). In overwhelming struggles with illnesses, journeys alone in the wilderness and initiation practices "one must die to the discursive mind which is culturally conditioned" (p. 205). Such a crisis is followed by a rebirth along with the realization of the immortal realm and the spirit in nature. An initiand, quoted by Jilek

(1974), describes an initiation: "you have to sing your song
because it comes to you, you can hear it and you voice it, but it's
something else, not you, that makes you voice it" (R.L., p. 72). As
a result the person is able "to take care of the spirit, enough for
him to stay and really help somebody.... the whole tribe" (senior
ritualist, p. 89).

## Liminal Experiences

Traditionally, learning to change states of mind happens in the
context of initiation procedures and healing practices. The
essential elements of initiation include three stages: the
initiands are singled out, go through a liminal experience under
the guidance of elders and are reintegrated into community life
(Turner 1969). For the purpose of this dissertation I define
liminal experience as the process in which a person ventures
outside of his role in the community and his ordinary sense of self
and opens up to perceiving non-ordinary dimensions of reality. The
initiands can venture on this process in peer groups or alone, as
in the vision quest.

Similar stages are encountered on a healing journey as the
following vignettes illustrate. Purification rituals can create a
sense of being stripped of one's personal history. Liminal
experiences and the need for shamans occur when a person is at the
end of her ability to maintain her ordinary sense of self and
reality. For example, the Sharanahua, a native tribe in Peru,

consult shamans when a sick person doesn't want to eat anymore and wants to die (Siskind 1975). Integration into community life often requires increasing responsibility for the community. As Fools Crow tells us, the need for curing has to transcend personal wishes and has to be inspired by the wish of helping others (Mails 1991).

Many aspects of the inner experiences of initiands and healers are frequently not mentioned but can be seen in the following accounts from Malidoma Some and Fools Crow. I'm very grateful to both of them and to all the elders who offer us a glimpse of the world through their eyes.

Malidoma Some (1993) tells an awe inspiring journey. As a child, he lived in a seminary in Africa, escaped and was initiated into his tribe, the Dagara. An initiation journey of several weeks duration confronted him with the challenge to open up to a reality greatly disparate from Western conceptions and to survive the tasks posed by his elders. To extract certain passages of his book, as I will do, does not offer the fervent flow of his experiences and the genuine beauty of his struggles and extraordinary experiences. In the following, I will only recount how Some grapples with his first assignment: to sit at a respectable distance from a tree and to never lose sight of it. He chose a yila tree and sat down in front of it:

For the next five hours nothing happened. The exercise merely became more and more exasperating, since I had nothing but a tree to look at.... To distract myself from this torment, I started thinking about something else. Hadn't I suffered worse than this in the seminary? And was this really a test of seeing or was it just an endurance test? The heat of the sun was more palpable than anything else. It was irresistibly taking possession of my senses. I fought this distraction by thinking about how satisfying it would be to survive this ordeal, to prove that I could do what others could. The heat, however, was impossible to ignore. Sweat fell into my eyes which were soon burning painfully.... Sitting with my eyes shut, I felt the impatience and frustration of someone who has something to do but can't get to it. (p. 206)

While all his peers had completed this exercise on the first day, Some had to continue on the next day: "I concentrated my sight on the tree. This, I thought to myself, is a gaze that has substance and meaning -- the look in my eyes embodies challenge" (p. 217-218). After hours of sitting quietly in an unrelentless heat and after being stung by a bee, he decided:

that I would not continue to torture myself for the sake of a tree. Since I could not openly defy the elders (that would have meant the end of me), I would trick them. They expected me to see something, so I would make something up. How would they know I was lying? ... Knowing meant knowing one's own world as it truly was, not as somebody else told you it should be. (pp. 218, 219)

After Some had told his fantasy, the elders stood up as if shocked, broke into incredulous laughter, and told him to keep looking. Feeling stabbed, ignored, devoid of the elders' trust, Some found himself in tears:

I was crying because of my sense of failure. What was wrong with me that I could not do what I was being asked to? Sitting in front of the tree and failing at my first initiation task made my being different from everyone else even more painful and intolerable. For here I was -- being laughed at! Here I was -- caught in a lie. My feelings were a mixture of everything: aloneness, broken pride, anger, alienation, ostracism, segregation. Through my tears, I managed to continue keeping an eye on the tree. Then I suddenly began speaking to it, as if I had finally discovered that it had a life of its own....

For the moment I experienced a deep fear that I imagined was similar to what one feels when one is told that death is inevitably on its way.... I could still think and respond to sensations around me, but I was no longer experiencing the biting heat of the sun or my restless mind trying to keep busy or ignoring my assignment. Where I was now was just plain real. When I looked once more at the yila, I became aware that it was not a tree at all. How had I ever seen it as such? I do not know how this transformation occurred. Things were not happening logically, but as it this were a dream. Out of nowhere, in the place where the tree had stood, appeared a tall woman dressed in black from head to foot....

When I looked again, she had lifted her veil, and the feeling of being drawn to her toward her increased. For a moment I was overcome with shyness, uneasiness, and a feeling of inappropriateness, and I had to lower my eyes. When I looked again, she had lifted her veil, revealing an unearthly face. She was green, light green. Even her eyes were green, though very small and luminescent.... Never before had I felt so much love. I felt as if I had missed her all my life and was grateful to heaven for having finally released her back to me. We knew each other, but at the time I could not tell why, when, or how.... The sensation of embracing her body blew my body into countless pieces, which became millions of conscious cells, all longing to reunite with the whole that was her. (pp. 219-221)

The tree woman spoke to Some for a long time but in his tradition to disclose her words would dishonor and diminish them.

Several means of surviving the challenge of initiation are apparent in Some's story. First, a vessel is required to contain the transformative experience. In this case, the vessel was created

largely through the larger community, peers and elders. The vessel was reinforced by Some's genuine honesty and an inner bigness which concurs with his ability to totally embrace the task at large.

Once the vessel is intact, the initiand or shaman needs intent. Intent is created by the spirit. Some's ruthlessness and fervor of sitting on the spot until something occurred is an example of intent. He returns over and over again to his experiences and his assignment. He perseveres until he achieves the shift of assemblage point that is assigned to him. Some's struggle around intent becomes obvious when he decides to lie to the elders. It is not uncommon for many of us to want to trick ourselves into having an experience, but true intent is impossible to fake. This becomes clear when the elders laugh at Some's contrived story. Regardless, Some's vessel doesn't break.

The need to reach one's limitations in order to truly shift one's assemblage point becomes quite clear in Some's story. After he tells his lie, he has an almost unbearable feeling of humiliation, which is the turning point in his experience. This theme recurs consistently in initiations and other shamanic practices: the need to go truly to the bottom and to extremes before transformation happens. This is equivalent to dying to ordinary reality and one's previous identity before new experiences emerge. During his first assignment, Some encounters a peak experience and a significant shift of assemblage point which involves his whole being. He sees

the tree woman, feels his body blow to pieces, listens to the tree spirit and hugs her.

## Hollow Bone

The pattern of shifting into an unknown world and then returning to a patient or the community with a message from the other world and a feeling connection with the spirit realm is one of the basic elements of shamanism. It is the final step in shifting one's assemblage point. Fools Crow recollects that "we are called to become hollow bones for our people and anyone else we can help, and we are not supposed to seek power for our personal use and honor" (Mails 1991, p. 38). A unique aspect of shamanism which distinguishes it from most other healing arts is shamanism's focus on the spirit. The shaman's task is to become a hollow bone, to get out of the way and let the power of the spirit speak. It is not the power of the shaman as an individual that brings about healing, but the power of the spirit which comes through the shaman.

The shaman has to determine first if the patient has enough faith to be cured and if the process of the person is to be cured. He can do nothing to influence this process: the direction is solely up to the spirit. If the shaman were to try himself to cure somebody without the guidance of the spirit, he would not only miss the help of the spirit, but would deceive the person who trusts him to work as the spirit intends (p. 154).

Fools Crow recounts in moving detail how he as a shaman mediates between his patient and the spirit. He says that "good intentions are not enough, and excuses are not enough. The medicine person and the patient must be glued together in faith for the curing or healing to occur" (Mails 1991, p. 43). Fools Crow goes on to say how this relationship can be established. He follows set rituals and also uses himself to enable the patient to have direct contact with the spirit. Fools Crow says:

> When I am curing or healing, I give faith to the person by sending it to them through my eyes. We make contact, and if they don't have enough faith already, what they see in me as the days pass will become theirs. This is one of the ways I get their mind inside of my mind so that they can see what I am being shown by Wakan-Tanka and the Helpers. (pp. 78-79)

Fools Crow talks about doing several different things. The patient is enabled to recognize faith and the spirit in the shaman. Through the growing relationship between shaman and patient this faith comes to belong to the patient. Fools Crow says that he literally "get[s] their mind inside of my mind" (p. 78). He brings the patient into direct contact with a non-ordinary state of being which is where healing occurs. This is a clear shift of assemblage point: the patient leaves his previous state of mind and enters a new level of awareness. She becomes one with the shaman and witnesses the messages from the spirit as perceived by the shaman. Thus, the shaman's relationship to the spirit itself is healing for the patient. This may also be the case in psychotherapeutic work. In the case example discussed in Chapters Eight through Ten, a client states that the therapist's kindness towards all of her

61

experiences contributed significantly to her shift of assemblage point.

The healer as well as the patient are faced with the task of becoming a hollow bone in yet another way. A crucial aspect of shamanism is that "curing a single individual is only important in terms of what this teaches the entire community" (Mails 1991, p. 38). Not only does the shaman enable the spirit to come through him, the patient herself is a conduit for the spirit and a means to teach the entire group.

This is a radically different paradigm than that of Western medicine, which treats a sick person as an isolated entity to be cured and not as the carrier of a potential message for the community. Compared with Western medicine, which aims at overcoming environmental and biological forces, indigenous practices aim at establishing the right relationship with the spirit and its presence in community life.

The shamanic approach to life speaks of a devotion to nature, the spirit and community, to something which is larger and wiser than any individual human. Honoring plants, animals, rocks, ancestral spirits and people and recognizing life in everything constitutes the basis of shamanism. Fools Crow says beautifully that "even though we receive power it does not move on its own. Something more is required of us to set the power in motion. We must show our

faith and commitment by doing the things the Higher Powers have taught us to do" (Mails 1991, p. 55). Shamanism requests that the world is honored as a place full of mysterious powers.

## Don Juan

In the literature on shamanism, Carlos Castaneda (1968, 1971, 1972, 1974, 1987) covers two unique points: he speaks in great detail about what the shift in assemblage point entails and also gives a clear example of a Western mind struggling with shifting its assemblage point. The term assemblage point and the idea of shifting the assemblage point were introduced by Castaneda in his accounts of his apprenticeship with Don Juan, a Yaqui Indian man. Although the anthropological truth behind these tales has been questioned, and though they do not directly represent the Native point of view, they have greatly influenced many renowned consciousness seekers and experts since they were published in the 1970s (Berman 1984, Achterberg 1985, Doore 1988, Kremer 1988, Tart 1989, Wolf 1991, Tucker 1992). From a consensus reality viewpoint, the teachings of Don Juan appear fantastic and seem to apply only to the indigenous practice of sorcery. However, Mindell has shown how Don Juan's ideas connect to psychotherapy and to individual and cultural change in the context of everyday life (1993). In this section, I will not address the developmental process involved in Don Juan's system, but rather will focus on how his system approaches the issue of shifting the assemblage point.

According to Don Juan (Castaneda 1987), the metaphysical structure of humans consists of luminous balls a bit larger than their physical bodies. Only a small number of energy fields inside this ball are illuminated by a point of intense brilliance on the surface of this ball, the assemblage point. Perception occurs when this assemblage point illuminates identical fields outside of the ball. The assemblage point can be moved to other spots on the surface or the interior of the ball which leads to "seeing," the perception of new energy fields and different worlds (pp. 15-16). It is noteworthy that in this system, awareness is linked with specific locations in an assumed subtle body. Other spiritual traditions are also concerned with developing awareness in certain subtle body centers, for example, in each of the Indian chakra areas of the body (Tansley 1977) and in various functional organ systems in Chinese medicine (Kaptchuck 1983). Thus, shifting the assemblage point involves a bodily awareness, not merely an intellectual or visual awareness.

Castaneda points out the core process behind shifting the assemblage point:

> Don Juan stated that in order to arrive at "seeing" one first had to "stop the world." "Stopping the world" was indeed an appropriate rendition of certain states of awareness in which the reality of everyday life is altered because the flow of interpretation, which ordinarily runs uninterruptedly, has been stopped by a set of circumstances alien to that flow. (1972, p. xiii)

To change the dominance of ordinary awareness and shift the assemblage point, one needs first to loosen the grip that normal

perceptional reality has on one. In order to do this, Don Juan employs what he calls "not-doing." Not-doing is described as follows: In meditation and in everyday life, when we experience irrational imaginations or "impossible" sensations, many of us have difficulty sustaining our focus on these experiences. In fact, consensus reality dictates that one should not focus on such experiences. However, it is only when we can hold our attention on these strange processes that we are able move our awareness from its normal everyday way of perceiving the world (the "doings" of the world) to new and different states of consciousness (the "not-doings" of the normal world) which while unusual, often hold wisdom and answers to life's problems (Mindell 1993). Thus, shifting the assemblage point requires one to select those experiences that will enable one to transcend everyday reality.

According to Mindell, the key is not to do what you already know how to do (1993, p. 180). He elaborates: "The dreamingbody requires more than wellness; it wants challenge, risk, personal power, and freedom. Even more than this, the body must seek danger in order to become itself .... because it seeks the uncanny, at the edge, through dreaming:" (1993, p. 153). An example of "not-doing" occurred in my life during the past week: I have been under great pressure with my studies and I have been puzzled by my ability to continue to work effectively despite exhaustion. The experience has put me into a continuous altered state consisting of a sense of feeling light and ungrounded. The world has appeared not as I am

used to it -- a calm and clear experience -- but as fluid pressure pushing me forward with the sole purpose of me completing my work.

While meditating on this, I suddenly understood one of my recurring childhood dreams. In those dreams, a force is after me and a strong wind blows straight at me. If I were to run fast enough I could take off like an airplane and fly. From meditating on these dreams, I suddenly realized that great pressures actually help me to make contact with my "Zen" nature, my single-pointed focus and ability to complete big tasks. I did "not-doing" by dropping my normal view of pressure and exhaustion as negative experiences and getting into contact with the power and focused attention these experiences actually bring me. I "stopped" my normal world and got in touch with the meaning and flow of my so-called disturbing experiences.

Castaneda (1972) recounts one of Don Juan's not-doing exercises:

> He told me to look at the holes and depression in the pebble and try to pick out the minute detail in them. He said that if I could pick out the detail, the holes and depressions would disappear and I would understand what "not-doing" meant .... He pointed to the small shadow the pebble cast on the boulder and said that it was not a shadow but a glue which bound them together. (p. 190)

This exercise has been helpful to me in understanding that not-doing doesn't mean to passively wait for something outstanding to happen to me. Not-doing, for me means to realize what is happening beyond doing, beyond putting a usual description onto what we perceive. In "not-doing" there is a moment of sudden change in awareness, of grabbing a strange moment and of fixating the

66

attention on a new dimension of experience.

Two other ways in which Don Juan utilizes the concept of the assemblage point are to discuss the issues of taking responsibility for one's life and of using death as an advisor (Castaneda 1972). In my case, the former would ask me to consciously seek out the turbulances and pressures in my life experiences and to use those experiences to become my total self. The latter would invite me to take seriously the reality of my eventual death, to consciously "die" to my ordinary goal of being calm and relaxed, and to merge with my own intense nature. Psychotherapy deals with the psychological aspects involved in the foregoing processes while shamanism aims at realizing that the forces we struggle with are actually allies on our path; I could use my pressure and exhaustion to find the right approach to my work instead of just being annoyed at feeling so pressured and exhausted. Process work deals with these processes by following people's momentary experiences as they point towards working either psychologically, shamanistically or both.

Don Juan (Castaneda 1974) recounts three troublesome areas of perception. The first is to disregard what one has experienced and to feel as if it had never occurred. The second is to accept everything at its face value and to feel as if we understand perfectly well everything that we perceive. The third is to become obsessed with an event because we cannot disregard it as something

very normal due to its unusual quality (pp. 58-59). A "warrior," on the other hand, acts impeccably and uses everything he experiences as a perceptual challenge: he doesn't totally believe in anything and never assumes he knows anything absolutely, but he gladly accepts whatever he experiences as part of his task of being a human in a mysterious world. This attitude enables the warrior to fluidly change his/her assemblage point as experience dictates.

Don Juan's message (as well as that of process work) is that if we resist and/or reduce irrational experiences to normal everyday categories, these irrational processes have a tendency to express themselves in ways that are more and more difficult to accept and manage. In other words, interpreting life through one fixed assemblage point invites instability and disturbance. For example, I was once preparing a seminar when I had the following dream. A tidal wave swept my notes away, the world broke into eleven million pieces, and I turned into a seal. After the dream, I thought I should perhaps not try and structure the seminar so precisely, but I could not let go of my plan and continued on in great detail.

During the first morning of the seminar, I demonstrated the steps of an inner work exercise. When I invited people to explore the exercise themselves, they asked me to first continue with my inner work. Soon, I started to cry -- seemingly out of nowhere came buckets of tears, like tidal waves -- as I got in touch with how sad I felt at not being able to let go of my rigid plan and focus

more organically on groups. My nice, neat, unified world had been broken into pieces. My experience was well received, since the group was not only impressed with my ability to shift my assemblage point but also began to discuss their own potential to create both rigid and open atmospheres.

There are still other ways to shift the assemblage point, for example, through the arts. Don Juan likes to listen to poems. He borrows the feeling and beauty that the poet himself/herself experiences. He shuts off his inner dialogue and lets his inner silence merge together with the feelings inherent in the poem/poet and through this he experiences a shift of awareness. (Castaneda 1987, pp. 130-131).

Throughout all of the different aspects of learning to shift the assemblage point, Don Juan stresses the invaluable role of a mentor. The mentor removes doubts from people's minds and thus frees the spirit and the person's attention to change the assemblage point (Castaneda 1987, p. 142). Furthermore, the mentor's own wisdom, detachment, energy, clear-mindedness and endurance can channel the spirit and be an intermediary link between the spirit and experience, on one hand, and the person's focus of attention, on the other (p. 13).

In learning to shift the assemblage point, Don Juan says that the goal is not to learn a new description of the world:

> I said that only if one pits two views against each other can one weasel between them to arrive at the real world. I meant that one can arrive at the totality of oneself only when one fully understands that the world is merely a view, regardless of whether that view belongs to an ordinary man or a sorcerer. (Castaneda 1974, p. 240)

Thus the task in shifting the assemblage point is to acquire a focused attention and an open-mindedness that allows as yet undefined and mysterious perceptions to emerge and capture one's awareness; this in turn can take one to experiential realms which defy consensus reality but which contain deep wisdom. These mysterious powers can only be witnessed with the body and cannot be explained; in other words, one feels new and strange experiences which can unfold into meaningful processes, but the actual workings of these processes remain a mystery. Learning to shift the assemblage point requires that one develop an awareness of both ordinary and non-ordinary reality -- of both the normal, everyday mundane world and of the strange, irrational world; furthermore, one needs to develop fluidity to move back and forth between them and to live with full awareness in either.

Mindell (1993) warns about the social implications of learning to shift the assemblage point:

> Yet you know that you cannot wait for your world to awaken spontaneously, for you may observe its change from the grave. You must wake up and can no longer afford to see your rule breaker's journey as only a personal battle of individuation. The results of your death walk are important to everyone. Your individual attempts to become your whole self are provoking change around you, even now as you read this. Eternity asks you, so to speak, to model world change as the whole planet considers how it will survive its death walk with nature.

> To survive your deathwalk, you must be both vulnerable and invisible. First you must cry for yourself, as the victim of your own and other's unconsciousness. Then you must stand strongly and congruently for yourself, against opponents. Finally, you must drop your personal history and smile. If you have gotten this far, you have the power to even take sides with the jury, to see its viewpoint and attack yourself before it can shoot. (p. 205)

Remember the case example where I cried in front of people about my inability to let go of my rigid seminar plan? My struggle and weakness were meant not only for my personal growth but also for other people to witness. Being weak and vulnerable is generally not well received in our society, especially in a professional setting. I felt on trial and under the scrutiny of people attending the workshop. At that moment, my sense of the power of the irrational enabled me to act as congruent and genuine as possible. The result was that I not only shifted my own assemblage point but possibly the assemblage points of some of the workshop participants as well. The implications of this are far-reaching: it suggests that social change involves the collective shifting of the assemblage point. This social dimension is a fascinating and important topic in itself and has been discussed by Mindell (1992a, 1995).

Malidoma Some, Fools Crow and don Juan all talk about the importance of stopping the ordinary construct of reality in order to have a direct experience of spiritual realms. If one does not stop ordinary reality, one loses what is most essential in life, the connection to a larger spirit. The need for alternate realities and the relationship between process work and shamanism has been

71

documented by Mindell (1993). He focused on the developmental path of living the spirit which appears in shamanism, and translated shamanic developmental concepts into psychology and social change. The particular contribution of my research is to document the application of one particular shamanic concept, namely shifting states of mind, to psychotherapy.

In the following case example, we will clearly see the necessity of stopping an ordinary way of relating to reality.

# CHAPTER 3: CHANGING VIEWPOINTS: CASE STUDY I

*Only if one pits two views against each other can one
weasel between them to arrive at the real world. I meant
that one can arrive at the totality of oneself only when
one fully understands that the world is merely a view,
regardless of whether that view belongs to an ordinary
man or to a sorcerer.*
                                    *Don Juan*


The central question I have raised thus far is: how can we step out

of our momentary states of mind and expand our awareness and

experience? I have outlined some terms which are important in

process work, such as primary and secondary process, edge,

congruence, second attention, metacommunication and metaskills

(Arnold Mindell 1985, 1988, 1993; Amy Mindell 1995). In this

chapter I present the verbal transcription of a video-taped therapy

session in order to: a) explain these concepts and the methods of

doing process work; b) give an example of being stuck in a state of

mind and going beyond it; c) observe how invisible forces organize

people's visible behaviors and experiences; d) outline parallels

between shamanism and process work, and e) demonstrate shifts of

assemblage point.


## Philosophical and Empirical Assumptions in Process Work

Before presenting the video-tape, I'm inclined to state the central

assumption and empirical observation brought forth by Mindell

(1985, 1986a, 1986b, 1987, 1988, 1989a, 1989b, 1989c, 1992, 1993,

1995) who founded and developed process work. Mindell, a physicist

and Jungian analyst, has expanded Jung's finalistic view on dreams

to all areas of life. He has found that acute and chronic illnesses, mood alterations and altered states of consciousness, relationship and group conflicts and world problems are potentially meaningful for personal and social change. The application of the finalistic paradigm, which states that events are potentially meaningful for people's development, differentiates process work from practices which focus on eliminating problems.

In process work people are invited to learn from the nature of experiences and events, to experience what is happening more fully, and to elicit the information and energy which is contained in disturbing, non-ordinary, irrational and mysterious experiences. For example, the following case study will show how the process which a person suffers from offers its own unique solution. Process work focuses not only on ego-compatible experiences and intentions but also on experiences and processes which lead us to revise our sense of identity and reality. The central task in process work is to follow a process precisely.

The story evolves around E, a woman in her twenties who was at the time in a difficult spot in her life. I volunteered to work as her therapist in a supervision session designed to provide specific feedback for therapists. This was a training situation in which a supervisor was present to give me feedback and assist with my learning. The client herself was also a student who volunteered for this role; because she was also studying process work, she was

74

highly familiar with its concepts and interested in experimenting with it. Due to her training, she was also more able and willing to stay with experiences which fall outside of consensus reality.

Various therapeutic training programs use a live supervision model. The systemic model in family therapy (Hoffman 1981) uses the concept of live supervision not simply as a method of training but as a method of working. While one or two therapists work with a family, two or three therapists observe from behind a one way mirror and give specific suggestions to the therapists interacting with the family. The difference between this model and process work is that in process work the supervisor sits with the therapist and the client and is an integral part of the work. The supervisor was Joe Goodbread, a teacher of mine who has been involved in developing process work since the 1970s.

Context of Therapy

This verbatim transcription of one therapy session will be presented in six sections. Comments will follow each section. A few parts of the session have been summarized in an attempt to shorten the transcript. The names of the participants have been changed and certain details omitted in order to protect the anonymity of the people involved. "S" refers to me, "E" to the client, and "J" to the supervisor.

**Under Pressure**

<u>Section 1</u>

S It's terrible. I'm so nervous. I have not been nervous like this for a while.

E (reaches out and holds my hand)

S I'm really scared of getting stuck, (looks at J), of getting to an experience where I have no idea what to do.

E (looks down)

S And where I feel criticized, inside and outside. I feel insecure about the tension inside, of wanting to be a good process worker. That pressure inside of me makes it hard to relate to you through who I am. I feel I lose something under this pressure. (speaks distinctly)

J There is pressure?

S Yeah.

J What kind of pressure?

S Pressure to really be sharp in terms of seeing what the process is, and where the edges are, and where to go and what would be best, and seeing the whole. There is pressure to do something. When I say that, I think I could relax about it.

J Now, when you feel pressure like that, does that help you? With some people, when they get scared shitless, it really helps their performance. It really helps their awareness. With a lot of people it has the opposite effect. I think there are certain actors, who, if they don't feel like they have incredible stage fright before they go on, feel that they are gonna do a lousy performance.

S (looks down a lot) I'm mixed. A little bit helps me to really get clear. I don't know. At the moment I feel it's too much. But maybe it works anyway. (looks at E, looks down and puts finger on forehead)

S Can I have another minute? (looks at Joe) Is that ok with you? (looks at E)

E Take as much time as you need.

S I think that's what I would like to get out of it, besides just what I learn from the work. Anything I could learn about my altered state would be great.

E Yeah, you can work on it at the same time: your altered state. I also had an idea. I don't know if this is right for you. If you're worried about criticizing yourself afterwards, I'd like to give you the task of having the first go afterwards of analyzing what happened, and telling us about it.

S I can do that. (pauses, shakes her head, tucks in her leg, sniffs a couple of times) I have such a strong experience of not being able to do anything. (looks up, E puts her hands on S's knees, S puts her hands on top of them, S smiles) And it catches me by surprise. I don't expect it because sometimes I'm much easier about working in front of a teacher.

E You don't want to do it?

S I do and I don't. (moves closer, lowering voice) I'm sorry. I just don't want to jump over it.

E It's ok. I'm getting vicarious relief. I'm in an incredible state. Momentarily so. (smiles)

S It relieves me when you say that. Maybe I can be here now with you. I feel more here with you at the moment.

E Ok. (looks at S with a big smile moves an inch closer)

S Maybe we both have something that we wanna run away from? That we don't quite wish upon ourselves, like being born on this earth? (laughing)

E Exactly. I have some altered states and troubles myself. (looks down)

S Ok. I can focus on you now.

E Are you ready?

S Mhm, ok.


Comments

I cannot work well with E. I'm stuck because of the pressure to succeed that I experience. My assemblage point reflects the typical goals and belief systems of helping professionals. Wanting to be a process worker with keen awareness is my assemblage point and predicament in this moment. I'm torn apart by inner pressures,

fears and expectations of how to be a good therapist. In psychotherapeutic terms we could say that I'm in a complex (Jung 1960). My ambitions get the better of me and make it hard to relate to E's process and my own experiences.

I go on explaining what the pressure is about. I have an idea about it. I interpret the pressure as the need to be "really sharp in terms of seeing what the process is." This analysis of my experience of pressure doesn't help me work. The strategy I use to deal with this disturbance is "maybe it will work anyway" or "maybe I could be here now with you." I'm unsuccessful with trying to ignore the disturbance. I'm stuck: I can neither resolve my experience internally nor make it useful to E. As a result, I'm out of touch with the creative energy and information behind the pressure which is disturbing me.

My awareness falters at the point where I interpret my experience in the context of my ordinary assemblage point. This ordinary assemblage point does not allow me to embrace the pressure on its own terms and to explore how it might be connected to E's process. One of the reasons I can't shift my assemblage point is because, in this moment, I can't accept anything other than my ordinary mind set as my guide in how to deal with the situation. Here we see the difficulty of shifting my assemblage point. Because I am totally identified with being helpful and on top of things, no part of me is available to work with the mysterious experience of pressure.

A more shamanic approach to the experience of pressure would be to unfold and relate more deeply to it. This perspective would introduce another viewpoint, namely that the pressure may be either a potentially helpful force or one that I may need to appease or confront. If I were to value my experiences and the forces behind them, I might be able to go deeper into them, while watching E's feedback.

Two signs seem to indicate that my experience connects with E's process. First, the altered state around the pressure is non-ordinary, irrational and strange in light of how I normally feel when working with people under supervision. This might indicate that something more is happening besides the therapist being in a complex. Second, E's feedback indicates that my experiences are linked to her process. E's tension is alleviated by my "being in a state," because I seem to have taken over the role of "being in a state."

Role occupation theory proposes that the person who is acting most in accordance with a particular role or state will represent it, while others present in the field become representations of other aspects, states and roles. Mindell (1988) states "the part any given individual plays in a system is determined by what other parts are occupied" (p. 47). In this case, E feels better when I seem to represent an aspect of her process.

In the context of shamanism, the healer frequently opens up to experience and takes on the struggle and/or the forces which bother a patient. The healer's connections with the spirit or spirit forces enable her to sacrifice her profane way of being and to shift her assemblage point in a way which allows her to work with the forces which bother a client. In a shamanic framework, if E indicates that the experiences which I'm caught in belong to her process, I would consider that "the ball might be in my court," meaning that it is up to me to unfold this aspect of the process.

Traditional psychotherapy emphasizes setting clear boundaries between therapist and client, which is necessary. Such clear boundaries are intended to prevent misuse of the therapeutic container. Yet, practically and theoretically, it might not be possible to totally separate E's and my process because the therapist and client's experiences are also influenced by an overall field and the environment. In fact, if a therapist is only tied to rules about boundaries, she may do her client an ethical disservice by missing the importance of moments when boundaries blur. For example, my experience above was more connected to the overall process than I originally realized. Important aspects of the process were trying to emerge through my experiences, as will become obvious later in this session.

In the realization of Aboriginal people, our experiences and connections originate in dreamtime and dreaming. Because most

psychotherapists, unlike shamans, are not trained to shift their assemblage points and to move beyond consensus reality, this level of interface between therapist and client might elude recognition.

**Yearning for Relief**

<u>Section 2</u>

E So, I want to work on my relationship. (pauses, looks down, then up towards the sky) It's hard to talk about.

S Maybe you should go slower.

E It's interesting that you are in such a state. I feel relief. I have been in a state all week, so has B. Just crying. We are in a terrible state together. (presses lips together, puts hands over her face)

S Take your time. . . You shake your head. It's too much.

E It's too much. All the details. We need help, both of us. I need help, the relationship needs help. I don't know what kind, but I thought just talking about it might be relieving. To share the suffering. (laughs and shakes her head, clears throat)

S I notice you look down when you talk and I'm wondering if you...

E I feel like. . . (puts hands on the sides of her head)

S Just take your time and notice what is happening (puts hands on E's hands).

E (sighs, clears throat) Just a lot of feelings; sadness, pain, vulnerability. We have gotten ourselves into a really sticky mess! Really! We have created an incredible mess for ourselves. (laughs, sober voice) We couldn't have done a better job if we set out to do it deliberately. (sniffs)

S (whispers something)

E (laughs) That is true! I want to kill myself, it's such a mess.

S I feel your fingers.

E It's nice being in a cozy little spot. (pauses) Ok, I got to tell you more details. So we are in the process of breaking up. That's what's happened, that's what's happening, that's what we're talking about. But we can't afford to do it. (leans back for a moment and

81

laughs, deep sighs, then cries) It's so absurd. We're doing it, but (shakes her had) it's just impossible. We're enmeshed financially and in other ways. It's gonna be like that for a while and it's just a very sticky situation, emotionally, between us. It's generating intense suffering. (looks up, then down)

S If you could get help from me, what would you need? If you could be outrageous, what do you need? Do you need financial help, do you need emotional help? What really do you need?

E (looks up, pauses) I feel hopeless. Nobody can do anything.

S How about not being hopeless yet. I bet you have an idea about what you need . . .

E (interrupts S) Wisdom! Somebody come up with some wisdom for us, for me. About how to proceed, about what we should do to ease the suffering.


## Comments

Both E and I are in a partial trance, absorbed by our internal experiences and processes. Webster's dictionary (1988) defines trance as a state of insensibility to external surroundings. Additionally, Tart (1989) points out that people can be in what he calls a waking trance, meaning absorbed in their ordinary consciousness, sense of reality and mind set. For the purpose of this dissertation I define the term trance as a state of absorption in an altered state of consciousness of various degrees. In my practice of process work, I find that a trance often occurs in the following situations: a person is not consciously interacting with what puts her into a trance or a person is not fully able to unfold the trance or altered state.

I'm in a partial trance because my ordinary assemblage point doesn't support the irrational experiences I'm having. I'm caught

82

in a battle between my ordinary assemblage point, which wants to perform my skills well, and an assemblage point which embraces whatever happens, no matter how strange it is, as important and potentially enlightening to me and the client.

Because I'm in a trance I cannot relate well to E's experiences and her process. Regardless, I am aware of her signals and try to keep my eyes on her feedback. I invite E to explore some unknown and mysterious signals. For example, I notice that E makes long pauses between speaking and looks down a lot. My comments aim at inviting E to go inside in order to explore sensations and feelings whose qualities are currently unknown and mysterious (in her words, "just a lot of feelings"). Because I'm in a trance and have trouble relating to E and where her process is taking her, I cannot create the necessary support and environment for E to explore her experiences further.

Without a clear understanding of the process, I jump from one thing to another, waiting for something to "catch fire." I test different approaches and hope feedback will show a viable way to go further. E's feedback is interesting. She follows my suggestions a little bit, has intense feelings and suddenly laughs. Something in her "cracks up" in the face of an impossible situation and challenge. I wonder if a sense of liberation is hidden in her laughs between tears. E might not be going deeper into her feelings because a detached state in her also needs to be acknowledged. Her side

comment about needing "wisdom" seems to support this possibility.

Trance states also happen in the interaction between E and me. We sit close to each other in a cozy atmosphere. There are many pauses in our interaction, and we frequently look each other in the eyes. These signals indicate trance-like states, probably experienced by both of us. Looking back I wonder if the "sticky mess," which E suffers from is also constellated in my immediate interaction with her in the form of trance states which curtail our ability to respond to the process at hand.

A shamanic perspective would have offered me the support to welcome and work with trance states. My trance could and will, as we will see, offer access to pivotal experiences outside my assemblage point, outside of my ordinary perspective of what I and E seem to go through. Traditional professional expectations of psychotherapists, on the contrary, require a psychotherapist to be on top of things and not to work with how she is part of the system. In shamanism a healer is frequently trained in connecting with a patient's problems through unfolding his own trance states and relating with commonly invisible forces behind a person's illness. Shamanism can offer us the perspective that, at least in some cases, healing forces can only be accessed outside of consensus reality.

## Summary of Next Section

In this section, I ask Joe questions about the process. Joe suggests that "we" is a secondary process. He explains that E uses the word "we" over and over again: "We are in a terrible state together, we have gotten ourselves into a sticky mess." They have a relationship problem in which the sticky mess, not the other person, is the opponent. It looks as if the big struggle at the moment is between two experiences, one of being together, and one of coming apart, which seems to be in the foreground. With Joe's insights and support I try to go on. I start by relating to the state E is in.

## The Sticky Mess

### Section 3

E You see, I can't tell anymore what's outer and what's inner. I don't know that it matters. I just feel it has been an unending stress. I don't know if it's me, if it's B, if it's us, if it's the world. I'm sorry, I feel I'm not offering clear information. I guess this is the messiness. This is like the mess I feel; levels that are all untangled; legal, financial, emotional, inner, outer.

S What is it like being in a mess?

E Normally, it is painful, like a pressure. I experience it as a tense pressure. But just then when you asked about it, it felt alright.

S Really.

E Yeah.

S So there is this pressure. (shows it with her hands and arms) You see it and then?

E I see it and think "I can go through it." I just have to be in it. (puts her hands on her face, sighs) I think "it's ok." Then I see B suffering and I can't bear it. (cries)

85

S You see B suffering and you can't bear B's suffering, and your own suffering.

E I wish I could give her what she wanted.

S You suffer when you don't give B what she wants?

E Mhm. I love her but I know I'm not giving her what she wants. That's not happening.


## Comments

In this section E describes her experience of being in a sticky mess from various angles, including the possible contributing factors, feelings of pressure, and the momentary relief when talking to me about it. Her ordinary assemblage point is trying and to single out possible factors, i.e., me, the other person, the relationship, or the world. All these levels are important and are addressed in various approaches to working with relationship difficulties. For example, some approaches focus on helping people to find within themselves what they see and look for in other people (see Jung 1960 on projections, Beattie 1987 on co-dependency); others focus on facilitating the interaction between people (Watzlawick 1967); and still others address the social and cultural dynamics behind a relationship issues (Hooks 1990, Kochman 1981).


E is not able to locate the cause of the problem in a single factor. She can't tell anymore what's outer and what's inner. This indicates a need to shift the assemblage point towards addressing the transpersonal element of the forces she experiences, regardless

of whom they are associated with. This is the domain of shamanism.

While shamans differentiate between outer and inner worlds, between ordinary and non-ordinary experiences, and between the profane and the sacred, they focus on making the transpersonal forces behind our experiences tangible for people. Shamans go beyond the dichotomy between inner and outer worlds and work with the spirit forces which influence people and couples. This is a radical perspective which suggests not only that transpersonal forces influence relationship life but also that people need to take their personal relationship with these forces seriously.

E feels relieved from the pressure when talking to me about it. This is not astonishing to me. The presence of another person can offer us knowledge or a different attitude, such as compassion or detachment, in dealing with a particular situation. It seems to me that other people can lend us their assemblage points and change the basic premise from which we approach the difficulty.

Based on my own experience, I find it hard to value the personal, social or perennial forces involved in my struggles if I am by myself. Because I have to deal with my immediate experiences one way or another, something like a life and death struggle may ensue. Will I momentarily break down under the weight of the situation, or will I rise above it by summoning up my deepest spiritual beliefs or by remembering internal and external forces which can guide me?

How can I shift my assemblage point and change from being only the victim of my immediate experiences to transforming them?

E can't bear to see her friend suffer. This is the experience which brings her down. While E might need support in not being able to give her friend what she needs and deserves, E's suffering and love for her friend suggest that she is not able to express something of the love that she can give. The earlier hypothesis that the "we" and the togetherness is a secondary process would go along with this idea. I wonder if there is an unknown dimension to E's love.

**Trying to Step Outside**

Section 4

S Can I take a moment? (E shakes her head to agree)

E What are you thinking? You are looking at me so intensely.

S I don't know if I can leave you alone right now. On the other hand, I can't work. Nothing inside of me functions. And it is very difficult for me (cries). I don't want to focus on it.

E Don't function then. Just follow yourself. You're crying, you keep crying.

S I can't work with you. It is so difficult for me. I can't help it. It is so difficult for me working in front of other people. I experience myself failing. (looks up towards the ceiling) I thought "not again, not again". I feel so blocked, and it is a very difficult experience. (shrugs shoulders) The constant thing that's happening is: I hear what to do but then criticize myself for everything I'm thinking. I feel like I can't do anything to help you. If I were outside this situation, then I could work. (moves her hands towards her middle)

E You could try going outside. Maybe you are dreamt up. (laughs)

S I don't think I'm dreamt up. I don't think that is true. I feel that's not true. Maybe a little bit. But the rest is me. Maybe the failing or the....

E Yeah, the failing or not being able to find a solution.

J I think that's an incredible idea. What about standing outside of the situation and looking in for a minute.

S (steps outside, sniffs)

S I see there is a complete mess. In the moment I feel she has only the possibility to complete going down and failing. (looking at her empty seat)

J How come? Maybe you could give her some help, maybe you have some advice for her.

S I think that she would sit with E alone. (pausing a lot)

E You'd sit with me alone and what? (smiles)

S If I would sit with you alone.... (E smiles, S pauses)

E How?

S I would feel free. I would feel free to bring out whatever I have. At least as much as I have, I would bring out.

E Like what? (sits up)

S Myself. I would bring my personal experience out, what I think, or what I feel, and I would focus less on you, on trying to help you. (moves to E again)


Comments

I continue to be unable to work with E. Nothing inside of me functions the way I want it to. I'm faced with non-ordinary responses which don't go along with being a therapist. I can't make them useful because I'm so identified with helping E. Compared to my expectations of being a therapist, I'm failing. At this point, my assemblage point is around being a therapist. My whole world view is that my role is to help E in a specific way, by applying my clinical skills. I am unable to shift from this perspective, but I am also unable to maintain a therapeutic approach, because my inner

experiences are already moving on to another way of being. They are indicating a possible new assemblage. This is a clear example of the struggle around shifting one's assemblage point. The old way is starting to break down, and the value of the new way is not yet known.

In terms of my ordinary assemblage point, I experience failure. I have gone through the experience of failing before in the context of supervision. At this moment, I suggest the possibility of being outside of supervision. What does the situation of being supervised mean for me? It means that there is somebody outside who knows what is right and wrong, somebody who can follow process structure tightly, somebody who does not indulge too much in human suffering but works with the experiences.

At seminars I have worked in front of fifty people, happily concentrated because many people want to learn from me. Such a context moves my assemblage point and helps me feel in touch with what is trying to happen. I feel like extraordinary things come out of me, and I'm open to the challenge and to waking up about my shortcomings. In supervision, my psyche supposes that nobody is interested in learning from me, and that it is only about evaluation, even if this is not that case. Joe supports me to move outside this mental straightjacket. But will I be able to?

Before we explore the idea of being outside the situation, E and I discuss the possibility that I might be dreamt up, meaning that I might respond to and represent part of her process. I vehemently deny this, in part because I know how my experience connects to my own process. If I had been really aware, I would have realized that my process is constellated only if there is a connecting point between the client and my process. If I knew where my edges were as a therapist in a particular situation, and if I knew the client's process, I could predict where and how I would get dreamt up.

The training aspect of this session and the nature of E's feedback offer me an unusual amount of freedom to explore my irrational experiences instead of repressing them, pulling myself together and relying on customary patterns of responding to disturbances. In this session, Joe is supervising me for training purposes. E, a peer of mine, gives me verbal and non-verbal permission to experiment with unfolding my experiences. Without E's positive feedback, it would have been unethical to explore my experiences further.

I try to step outside of my work with E by literally leaving her in the middle of the room and standing on the edge of it. Literally stepping outside is often helpful in gaining a more detached perspective. The first thing I realize is that I should go down completely. Then I imagine sitting alone with E and feeling free to bring out whatever is inside of me while not focusing primarily on

helping her. In this case, there is no indication that stepping outside led to a shift in my assemblage point. I couldn't take my suggestion to myself to bring out what is inside. I talk about possibilities without experiencing them. I can't get out of the system I'm in.

## Summary of Next Section

In this section I encourage E to explore some arm movements which prove to go along with her decisiveness, her primary process of establishing a solution. Both of us seem to strain somewhat and lack energy and inspiration. E gives me mixed feedback on the direction we take. The spark is missing because we work in known territory, with the primary process, which is familiar to E. At one point, J says that the feelings are so important. He sits down beside me as we change the course of our work. I ask E about her feelings and then begin to have many feelings myself.

## A Step Towards Freedom

### Section 5

S (to J) Please help me?

J What kind of help do you need?

S Anything, I'm such a mess.

J Let's focus on you for a moment. Can we put you on hold for a second? (E nodded yes and smiled)

J Tell me what your inner world is like.

S Like in pieces (smiles). I feel it doesn't go very well.

J Really?

S It's very hard for me to even sit here (cries).

J How come? I feel we need to go into this because this looks like your greatest nightmare. And if we don't go into this, there is gonna be a lot of information float afterwards.

S (nods)

J Can we call it "time out" and maybe S and I could work for a little while together? Could we do that? I think that's really essential, because I think otherwise everybody is gonna have a hard time afterwards.

S (cries) I would love it if you could tolerate that.

J I think it's real important. I think it's like a ghost in the room. I don't want a solution, you see. I'm not interested in a solution. I feel we are too solution oriented around everything at the moment. And I think that there is something that I would really like: to get down to the roots.

S (excited) I'd love that.

J Shall we do that?

S Yeah.

J You feel like you're disintegrating?

S (nods, shakes head) Everything goes away.

J Everything goes away?

S (moves her arms outward into the air)

J No body, no thoughts, no nothing.

S (repeats arm movements more downwards, cries, and attempts to speak) No thoughts.

J (smiles) Nirvana!

S That would be nice. That would be really nice. (laughs)

J It's not as pleasant as a shamanic disintegration.

S Not quite. (laughs)

J It's like a disintegration. Tell me why it's so unpleasant. I hear disintegration as having something attractive about it. So tell me about your disintegration.

S The unpleasant part about it is there is so much pressure and like. . . (strains to squeeze something imaginary between her hands and arms) I feel just squashed by it.

J Ah! So it's like the process is between you and the pressure, and the other person kind of disappears. And there you are. There is this big pressure, "squeak," and little S turning into a grease spot or something.

S (nods, laughs) Yeah.

J So let's see. If we did process work with this (puts his hand on the head, laughing in the room). What's primary? Primary is disintegration and being squashed, and the pressure looks like it's secondary. It's coming in movement from the outside. Right?

S Yeah, that's right.

J So, why don't I be S? And how about you being the pressure for a moment. Is that too abrupt, or can we try that?

S (moves forward on her knees, puts her arms around J's upper body and squeezes hard)

J Uhh! Och! Chch!

S Is it ok, J?

J Yeah, I'll give you a definite signal if it's not.

S (takes his head, pushes it forward towards the floor and pushes J onto the floor)

J Oh! Uuuuah! Oh! I feel like I'm inside a garbage compactor. Ah! Uhh! Umpf! Finished!

S You are still ok, J?

J Finished! How sweet! You are stroking my head. . . Yeah, that's very loving actually. It's sort of warm and loving. I rather like it. It's intimate and it's warm and it's loving. How nice! You evil thing though! I mean it's hard to do therapy laying down.

S (laughs and presses his shoulders down again)

J Hello!

S Hello! I don't know what I should follow now.

J You feel like a cat. Cats do that sometimes.

S I feel like that. (laughs)

J There is something really intimate about it.

S It's nice to feel a body.

J Yeah, isn't it? Feeling a body is such a huge thing.

S (strokes J while holding him down)

J I wish my pressure was like this. (laughs)

S But I think there is another pressure still.

J Is there?

S Yeah.

J This one is nice, though. It helps to feel a body. Let me try resisting your pressure a little bit.

S Ok.

J Well, I wanna be upright. (tries getting up)

S (pushes his head down, puts a pillow over it and pushes it down some more)

J Oh wow! Ok S. I have a very simple solution. You must feel the body. If you try to do therapy without feeling the body this thing is just gonna put you down and squash you.

S (nods slowly) Ok.

J Maybe this is too simplistic. So let's talk for a little while. Do you feel your body?

S Yeah, I feel my body when I'm not in front of a supervisor. But as soon as there is a supervisor I feel like I can't feel my body. So it's difficult for me to work. I loose all my orientation.

J Wow, that's heavy!

S But it's true.

J In front of a supervisor? (astonished)

S Yeah, like peers or teachers or. . .

J You can't feel your body anymore?

S Not well.

J No kidding! (scratches his beard, puts his hand around his chin, glances from side to side, looks dumbfounded)

E I get that too sometimes.

J Do you?

S I notice that I don't have my body. There is nothing left. Like no. . . (moves hands in front of herself) I can't organize my mind. I can't organize the sense of what I'm doing.

J Yeah. Now that to me is a mystery. Why it is that you can't feel your body when you are in front of a supervisor?

S That's true.

J This is a big mystery. If I approach this with a beginner's mind, I think this is a discovery of the first order.

S That's true. I leave.

J Where do you go?

S Outside. (makes an arm movement upwards while looking down, holds the bridge of her nose) I leave.

J So I got an idea. What about me being that thing pushing you down and you try to leave your body.

S Ok.

J (pushes S down)

S (jumps up) Whew! (throws her arms into the sky) I just go up.

J (tries hard to hold S down, but doesn't succeed) Jesus, you're strong!

S I feel like there is nobody who can hold me down.

J Ok. Nobody can hold you down (tries again by climbing on her back, nearly falls back) So there is something in you that won't be held down. This is your life.

S Oh gee!

J This is S's life. There is something like this. (shows the part reaching up by standing on his toes) And there is something else like "shump." (shows it by pushing an imaginary thing down on the ground) Something that just absolutely wants to hold her down to her inner experience.

S I would love to be able to. . . (moves from one foot to the other)

J Well, so now go ahead and maybe do this as an inner work. Here you are with these two things. One wants to leave and take off for outer space and the other one is into being anchored completely in her body.

S Mhm mhm. I feel I would need to find some way of. . . I don't know.

J Tell me about the liberation.

S The liberation?

J You must stay in your body and feel what's going on. It's your only link to reality. (laughing to communicate that he plays a role and supports me to go against it)

S That's not true!

J Yes it is! You know it! You, it's true. It's absolutely true. If you get out of your body you have nothing. (laughs) Your body is all you have.

S But I have all!

J It's just outer space that you lose. You fly apart. You lose relationship to everything. You, Salome Schwarz, the only link you have with anything is through your body feeling. If you lose that you're finished.

S Hm.

J Don't you contradict me! Not even internally.

S I do!

J You? That's not permitted. I know who you are.

S But I'm a free spirit!

J (reprimanding) You are free? You just fuck up and leave.

S Yes, I'm free to leave. You can't hold me down. (breaks out laughing ecstatically) I like that. That is like a ball!

J Is it like the "Uri Stier?" (J has heard S say "bull", in German, "Stier," in place of "ball.")

S (keeps on laughing) Like an "Uri Stier?"

J You know, like an "Uri Stier". You know this compound in
Switzerland, "Uri." Their symbol is a bull breathing fire, with
these intense eyes. Look at you! You look like you are in ecstasy.

S Yeah!

J What's happening with you? What are you experiencing?

S The feeling that I could say I'm a free spirit is really
something. I know this is really difficult to say. I think I've
always tried so hard to be here, and I work so hard on being here.
(teary voice) It's very, very nice to also be outside of
everything.

J Yeah, that's right. You were saying that if you could get
outside. . .

S What was I saying?

J If you could get a position outside of the immediate thing that
you would have no trouble whatsoever.

S Did I say that? Ok.

J Yes, you even tried. You walked outside of the group.

S But I couldn't get outside.

J Yes, because the free spirit needs more space, you see.

S Needs more space. (sighs in relief)

J You see, and because. . .

S That makes me realize that this is true.

J So how about experimenting a little more with the free spirit?

S Yeah, I will.

J You were touched by the idea of being a free spirit, of
supporting that part of yourself. Go ahead. Try it out. I noticed
you made a movement with your arms.

J "Come on, you have to be grounded!"

S I have already come to earth.

J I like how you say it! It looked like this: I'm not of this
earth. It looked like the queen of England.

S Once more. (reaches into the sky with her arms)

J (tries to pull me down again) You are a creature of the body. Forget about the spiritual bullshit.

S Goodbye.

J You are very hard to influence and keep down. It's amazing. You wouldn't imagine you have that kind of steely strength in you.

S Really?

J You are very strong. You know, like "drahtig." (German for "wiry") Like you have like steel cables in your arms and there's an unearthly strength in there. Trying to hold you down is like trying to hold down a piece of steel.

S (is silent)

J That was the right thought.

S Yeah. I was thinking that was what I was feeling or seeing. That's a part of me. I could acknowledge that as a part of me. I have another question: How would I be with sitting with somebody?

J I don't know. Let's try it. (moves back on his seat) You're ok.

S Ok. (gives J a hug) Thank you!

J You're welcome. Good luck! This is exciting. So let's try a little longer and see what happens. Maybe we have to go another round.

S Ok.

J That's an exciting way of working, so let's continue.

S I really learned a lot.


Comments

My assemblage point changes. I move from being stuck, to being in touch with my body, to being a free spirit outside of my previous identity and sense of reality. When and why did I change my state of mind? Joe works with me and changes the context of my experience. He is not interested in solutions, but proposes that my experiences are not only shortcomings but part of a larger field.

He gives me space to explore my experiences from the new perspective of being a client. In retrospect, I think that I must have felt abandoned at the beginning of the session, devoid of an internal authority who would treat my experiences with curiosity and compassion. Joe stepped in as a helper and ally. I respond to his suggestions with unexpected fluidity.

This experience brings up an ethical question. Does the focus on the therapist contaminate the client's process with the therapist's material? In certain instances, it definitely could. Important considerations in such situations concern the therapist's awareness of her own process. The therapist needs to know how she generally tends to feel when she works with people. If she always has a similar reaction to certain people and certain issues and situations, the problem is most likely her own and shouldn't be addressed during the session. In this case, the therapist's experience appeared extraordinary and irrational to her compared to what she usually feels in the presence of E and in the situation of being supervised by Joe. If we look at the very beginning of the work, we also see that E felt relieved whenever the therapist struggled with what to do. Such factors indicate that the therapist's experiences may connect with the client's immediate process.

If the process indicates that a therapist's experiences may connect to a client's process, then the therapist needs to get a better

understanding of her experiences. This may need to take place outside of the session because the therapist's own limitations may inhibit her access to the message hidden in her experiences and may make it difficult to use them for the benefit of the client. Thus, the therapist may need to overcome her own limitations before she can really make whatever is trying to manifest through her experiences useful. In this case, E gave me congruent permission to temporarily focus on myself during the session.

If I had felt together and secure, the best route might well have been to help E unfold the trance first. However, due to the my level of experience and my own emotional state, a possible route was for me to first unfold my experiences and then to assist E. In the following taped segment, we will also see a surprising and positive aspect of taking this route. There was perhaps a hidden wisdom in the course of the work.

Under Joe's guidance the confined state of mind I have been in turns into a rich flow of experiences, a concept which Mindell calls "ice to water." In process work, one way to get outside of the disturbing aspect of disruptions, such as pressure, or being in pieces, is by going deeper into these experiences. Systems change through positive feedback and through amplification of the unusual and disturbing element (Watzlawick 1967). The resulting chaos reveals a new behavior pattern and a potentially more encompassing system. Psychology, Western medicine and social policy often take

a different view and attempt to deal with disturbances by trying to eliminate them. As a result, they partially inhibit personal and social change.

Shamanism is based on opening up to the larger forces at work and on interacting with them as seeds for individual and communal development. Shamanism may have survived in every civilization because transforming our relationship to the forces in play and the forces themselves may be the only sustainable solution in the long run. As in shamanism, process work finds that irrational, non-ordinary sensations or visions, if explored, may offer helpful guidance (Mindell 1993). Unusual body sensations and other irrational experiences often seem to be outside our expected means of communication and can offer new insights.

The way in which process work methods help unfold and transform disturbing experiences becomes apparent in Joe's work with me. The work Joe does with me looks effortless, natural and explains itself. How is that possible? Joe has impeccable metaskills. Humor, a beginner's mind, a knack for the unknown, and a scientific precision underlie whatever he says and does. For example, Joe is curious about the unacceptable aspect of disintegration and does not get stuck on the idea of disintegration. He is aware of the lovingness with which I push him down, a kind of tough love about feeling the body.

At first, Joe's curiosity about the pressure enables me to start exploring an unusual body experience. The process does not end with unfolding the message and energy that emerges from my way of experiencing and acting out pressure. The sense of leaving comes up as a new, mysterious dimension. A "flow chart" of the whole process would outline this structure: In the beginning my primary process was needing help and being in pieces, and my secondary process surfaced in the kind of pressure I felt. After unfolding this experience I could identify myself with exerting pressure and the subsequent secondary process surfaced in my sense of leaving.

This section of the tape shows different methods used in process work, which I will mention but not explain in detail. Joe asks me to amplify the pressure by asking me to become it. That means to feel it, to move like it and to exert it. He amplifies my experience of leaving by holding me back somewhat, just enough for me to experience the force behind my sense of leaving. Role play, or the interaction between different forces, emerges organically, for example when I become the pressure and push Joe down, or when Joe tries to hold me back from becoming a free spirit. Finally, the interaction between different parts is organically subsumed in a new flow of energy, an unearthly force of being a free spirit.

Do the pressure and my belief that I need to feel my body when working with people actually hold me back from connecting with other aspects of myself? Theoretically, the pressure could be

looked at as the guardian of my limited identity. In practice, it doesn't matter much how we conceptualize different aspects of the process, as long as we are open to the actual flow of experience. Process work aims at following the path of least resistance, like water filling out all holes before flowing further. In this way, nothing is left undone.

Before Joe worked with me, I felt possessed by an uncomfortable experience which I could not utilize. After he worked with me, my assemblage point shifted. Previously, I had felt trapped in my views of how to be a therapist. In the following interaction we will see how my work with E shifted after Joe worked with me. It will become clear how my originally disturbing experience could become an ally not only for myself but for others too.

**Shift of Assemblage Point**

Section 6

E That was really intense!

S How come?

E I'll tell you. I had a dream last night that. . .

J The nagual! Here comes the nagual. (all laugh)

E I had a dream last night that I was in a room with you and A, and B and I. B and I were on one bed together, and A and you were on another bed together. B put her arms around me and squeezed me and I went out of my body.

J Gee! (holds his breath for a moment)

E I got into a state of complete terror. In fact, I was sleeping over at B's last night and she heard me make this groan at the same time that I went out of my body. It was a very real experience. I

went right out of my body. I was standing in the room like a spirit between the two beds. I felt like I had been driven out of my body, and I just sort of went. I just went. (moves arms from her stomach forward and down) You were the only one in the room who saw it. You could see me and you said something really weird which I don't understand. You said: "You don't have to celebrate." And that's all you said. It was a very strong dream.

J Where do these things come from? (awestruck)

E So when you just did this whole thing about going out of your body I thought "Yeah, the dream." I really had this experience of being outside of the body. Afraid.

S Wow.

E But you saw it and it seems like you knew what was happening to me.

S Would you like to do something with that?

E Well, it was really something watching you work on that process, going out of your body, because that's one of my experiences. One of my stronger experiences of being in the relationship is that I'm sometimes out of my body. I don't feel my body. I should explore that with you.

S Do you wanna experiment with that?

E Uhuh.

S Do want to sit or stand or lie down?

E I don't know. What do you think? I don't know.

J You see, S, now you are the expert at leaving the body for the moment.

E (excited) Yeah, Yeah! You tell me what to do! What do you think of that? Yeah!

S That sounds great. Standing!

E Ok. Yeah!

E and S stand. S gently runs her hands down E's arm to see if they are inspired to move. E puts her hands out, palms facing down, and S gently touches them from underneath. E's hands slowly move upwards while S touches her elbows. Then S gently touches the muscles besides the spine to bring awareness to their activity. E moves backwards more and more. S holds her as E bends more and more backwards in a suspended bridge. Suddenly E gets up.

E I feel like something in me wants to fall head first through the,
I don't know, through the galaxy. (looks down, walks in a circle,
turns her back to me, ready to go again) I just, I have to go
again.

S Maybe I could get some help? (holds hands with somebody while E
bends backwards supported by the arms)

E (turns around on the arms of the two people supporting her) Wow!
No, it's better the other way.

E (Turns around again and hangs suspended in the air on her back.
Her arms reach for the rug which she pulls upwards. Her hands
wander the surface of the rug.)

S Ok. Just keep going.

E Shoo uhh, pssh, shoow, phew! Ok. Can you hold me? Phew, pssh!

S (whispers) Yeah, that's right. Just believe in it.
I'm here. I put my hand on yours.

E (holds breath slightly after breathing) I feel like you're an
angel. You're an angle, with big wings, big fluffy wings. (teary,
sniffs)

S (whispering things to her)

E No, I can't feel my wings.

S You wanna try?

E I feel like I'm a spirit that's see-through. What do you call
that? Transparent. And I feel like you're an angle from God.

S And you are a see-through spirit.

E I'm a see-through spirit. (smiles)

S It's nice to meet you. It's wonderful to meet you.

E Yeah. (sighs in joy and tears)

S Spirit sisters. Beautiful, it's just beautiful. Mmm! I'm so
happy.

E Yeah, I feel like I have my own body, just see-through.

S Just see-through, yeah. (both laugh a bit)

E Yeah. I'm dead.

S Mhm. Congratulations. (gentle, loving)

E (laughs) That's why you said "no need to celebrate." I died. I got a shock and died.

S I see, wow.

E I died. I got a shock and died in the dream. And you said "no need to celebrate."

J Mmm.

S It's true. You are, you are.

E (at the same time) I don't know what I'm talking about.

S I understand you perfectly.

E Mmm.

S Here you are. Dead, a spirit, a see-through spirit.

E (repeats each word after me)

S No need to celebrate.

E It's done.

J Now I bet that if she would be really dead she would know exactly how to handle this situation.

E (chuckles) There is the other end of..

S Here comes J.

E There's God. (we all laughs)

E There's God. I always thought he would have a beard. I knew.

J I bet, if you were dead. . .

E See-through.

J And she was totally transparent, like everything just went right through her.

E Yeah, everything, yeah, right.

J I bet she would know exactly how to handle that situation.

E (simultaneously) Invisible.

S Yeah, yeah!

E Now, that I'm dead.

S Yeah, that's right, now that you are dead.

E Now that I'm invisible and see-through.

J Now that state must be the right state for this situation.

E Right! Hm.

S Mmm, It's true. Dead.

E (many ahhs) This feels like a good spot to be. This is definitely the right direction.

S Now, that you're dead?

E Now that I'm dead I have access to all the divine wisdom.

S What can you do? What are you gonna do?

E (sniffs and ahhs) The first thing that comes to mind. . . I don't know, it's not very concrete but then I'm not very concrete anymore! (laughs) I guess that's ok and the answer is ok. (laughs) And the answer that comes is I should act like a dead person. And that means I should. . . It's a feeling inside, it's like living as if I'm completely immaterial. I'm so obsessed with material things at the moment. But. . .

S You have more thoughts.

E Yeah, I can't quite put it into words yet. But it started me on a dreaming process. I feel it's a certain way to be that's (pauses), holding nothing back. Just.... (pauses)

S That is right, just like that, yeah, that's right. You can do it.

J I think that's it: it's that state.

E Yeah.

J Has the wisdom of God in it.

E Yeah, it feels like something pure. From this place, there's no need to hold anything back. Everything can be said and everything can be discussed. And the wildest options can be put forward. Things are not limited by time and space anymore. So everything can be ventured. Yeah, see-through.

J So, can I make a suggestion at this point? I think that we could actually go a lot further. And this would also be a natural place to stop.

E Yeah, that's fine with me.


Comments

A most mysterious moment arises: E's dream reflects what I've just come in touch with, namely the sense of being a free spirit, not confined to my physical experiences. In her dream, E is in bed with her friend, and I am there, too. Her friend squeezes her, whereupon E leaves her body. I was the only person who could see her in this out of body state. This dream manifests the connection between E's and my process in surprising way.

Through unfolding my own body sensations which lead to a sense of being outside of my body, it seems that I actually have been working on embodying and unfolding a part of E's dreaming process without knowing it. This resembles the practice where a shaman goes on a visionary journey on behalf of the client. Many shamanic cultures say that the shaman and patient need to be connected by the spirit: shamans look for omens and dreams to discover if they are called to work with a person. As part of the healing process, Fools Crow said that he puts the client's mind into his mind so that the client sees through his eyes and they have the same perspective on the world (1991, p. 78). This practice implies the possibility that, in certain cases, a healer or therapist may directly transmit his assemblage point to another person.

The idea of the healer of therapist taking the client's mind into his mind goes against the general tendency toward clear and explicit boundaries between the client and therapist. However, we have seen in the case example that certain aspects of the client's experience only emerge when the therapist momentarily unfolds the nature of her experience. This kind of focus ethically requires that the therapist is able to go far enough with her own experiences to get the meaning of them and subsequently to make the experience useful and significant for the client. Otherwise, the therapist's focus on herself becomes an ethical violation of the therapeutic contract, which requires the therapist to be a helper for the client.

From an analytical psychological perspective, the connection between my experiences and E's dream is a synchronistic event (Jung 1960). Synchronicity means that two events which don't interact in a causal way express the same information. In this case, from an ordinary state of mind, I couldn't have possibly known about E's dream, and E couldn't have possibly anticipated my process. Yet in the altered states produced by dreaming and unfolding non-ordinary body experiences, an acausal connection between E's and my process manifested.

As E tells the dream, she is ardent about the experience of leaving the body. This is a place to start working. After my work with Joe I'm more in touch with other dimensions of existence. Why do I

start working with her body? An out of body experience is a certain body experience which does not go along with our normal perception of the body. I speculate that if this experience is latent in E, her body will produce it naturally in its own way, on its own terms. I chose a "blank access" technique and ask her to stand and follow her body movements. Through body work E accesses a deeply internal state and gets in touch with being "dead," a see-through spirit.

What does it mean to be a dead woman in life? What holds us back from identifying with being invisible spirits? E says that in the state of being dead she is not obsessed with material things and worldly dimensions and the wildest options can be put forward. This is a big shift in her assemblage point. Because of time restraints we did not unfold her experiences more, perhaps through moving and relating as an invisible, dead woman. I speculate that she would have no edges to say or do whatever is truly inside her. She might not be interested in securing and holding on to things. Nothing could crush her because there is nobody there to be crushed.

There are many stages between being a mess and being dead, and there are many shades of metacommunication, awareness and experience. I have picked out two statements in this regard:

a) "I really have this experience of being outside of the body. Afraid." That means to me that some part of her is experiencing

something and another part of her is not believing and supporting it. At that point the experience gets frozen into a state. She is not experiencing anymore but she holds ownership of the experience. I wonder who is afraid, and guess that E, in her ordinary state of mind, is afraid of the unknown. In her out of body state, E would most likely not feel afraid. I speculate that she has not gone far enough into her non-ordinary experience, and that is what our work is about.

b) "I got a shock and died," is E's comment after having turned into a see-through spirit. She interprets her experience in a way that makes sense to her normal consciousness. In the following interchanges, (see "c" below) E seems to have moved away from the non-ordinary state and into her normal consciousness.

c) "I don't know what I'm talking about." I speculate that here E is attempting to pick up her normal consciousness where she left off. She assumes an ordinary perspective while letting the new experience sink in. This might be her way of integration, namely expanding her normal consciousness in order to be able to access non-ordinary experiences more easily, supported by her consciousness. Her work is not simply about accessing a new aspect of herself but about transforming her state of mind.

<u>General Comments</u>

In this session, being dead, a see-through spirit, a free spirit, emerges as an alternative to E's and my sense of being in a mess, confined to the "real" body, material matters, and successful solutions. The see-through spirit is a new assemblage point for both of us. In the beginning of the session, E and I are neither in our bodies or messes, nor out of them. Rather, we are stuck between two experiences. We refuse to go into the disturbance and we can't access liberation. This session shows how it can be helpful to go deeper into the disturbance, as I did with the help of Joe.

This case example illustrates the psychological experience of dying to ordinary reality and the liberation which emerges from the psychological and spiritual experience of being a "dead spirit." The following case example will document a different process involving the idea of dying, namely an individual's process around wanting to live and wanting to die.

# CHAPTER 5: SUICIDE

*It is only when we believe things to be permanent that we
shut off the possibility of learning from change.*
*Sogyal Rinpoche*


This chapter will briefly address some of the psychological
theories and ethical questions around suicide, in order to provide
a context for the following chapters, which contain a case story of
a suicidal client. Suicide may in part be an attempt to shift one's
assemblage point.


## Syndrome and Choice

The issue of suicide is emotionally charged on many fronts.
Different religious systems, governments, medical practitioners,
psychological systems and individuals have various and conflicting
views around suicide. The range of views includes the following: it
is a crime to attempt or commit suicide (regarded as a felony in
the English law until 1961 except in cases of insanity); it is
morally unacceptable to kill oneself and those who do suffer
eternal damnation (the Roman Catholic Church and fundamental
Protestantism); suicide is an honorable option in certain
circumstances (such as the freedom fighter dying for a cause, hara
kiri and kamikaze practices in Japan).


Science acknowledges the social, biological, psychological and
temporal factors behind suicide (Maris 1981, p. 308). While my
study focuses on individual psychology, it is critical to explicate

that the cause for suicide may partially emerge from outside of the individual. The social perspective recognizes that suicide may be instigated when an individual is left to his own resources as opposed to being integrated in a group. This happens when society disenfranchises individuals and groups, for example the young and the old, people of color and people with certain sexual orientations.

The question of whether or not an individual has the personal right to end his or her life is one of the most central in the discussion of suicide. One extreme of the spectrum of opinions is that an individual has absolute rights to his or her body and life, and that all individuals have the option to purposefully end their lives, especially if essential conditions of human life are not fulfilled. The other extreme is that the individual does not have the right to end his or her life, and that suicide is a sign of mental illness.

Current thinking on the option to suicide centers in part around the questions of which groups of people have a right to die and can even ask for euthanasia. Langone (1986) ask basic questions:

> Should there be a list of acceptable and nonacceptable reasons? Is it better to have an "ethics committee" make such decisions rather than the individual involved? But, then, if committees make such decisions, what would stop them from the temptation of taking advantage of their power to convince others - the nonproductive, the emotionally disturbed, the political and social misfits - to do away with themselves? (p. 160)

This brings us to the important question of who should make such a decision. With "who" I mean not only which person but also which personality part of an individual and based on what kind of states of consciousness.

Even if it is accepted that people who are close to physical death and in pain have the right to die, questions emerge when people are in comatose states in which they don't have their ordinary awareness available to make decisions about whether they want to live or die. Mindell (1989) has discovered that different aspects of a person may have varying opinions about living and dying. For example, a person who has said during an ordinary state of consciousness that they would choose to die if in a comatose state may express another opinion if they are in a coma. Discovering the wishes of a person in a coma requires that communication can be established. Mindell has done pioneering work in communicating with people in comatose states and in developing "thanatos ethics," which require that more than one state of consciousness be involved in a life and death decision.

If we take a similar ethical stance towards people who consider suicide in the face of unbearable suffering, we would not only need the agreement of their conscious identity but also the agreement of their dreams and their experiences in altered states of consciousness to determine the overall direction.

## Ethical Responsibility and Suicide Prevention

Considering ideas and ethics around suicide is essential in training and practicing as therapists. A number of clients come into therapy because they are suffering from depression and/or suicidal ideation or impulses. Other clients may not overtly feel suicidal, but are at risk of attempting suicide, for example, a woman diagnosed with paranoid schizophrenia might obey an auditory hallucination which demands that she kill herself. A number of clients who enter therapy have tried to kill themselves, and may again make suicide attempts during the therapeutic process.

In psychotherapeutic circles there are two general attitudes about the right of an individual to end life. The behaviorist and psychiatric approach is that it is the responsibility of the therapist to preserve the client's life, regardless of the client's wish to end it. Another approach, more in line with humanistic and existentialist psychologies, asserts that the therapist's responsibility is to assist the client in uncovering the immediate process, even if it involves the potential for suicide. General guidelines for responding to a suicidal person need to be carefully evaluated in each individual case. As I will discuss in the following case story (Chapters Seven and Eight), the enforcement of certain guidelines can, in specific cases, increase the risk of violence.

## Therapeutic Attitudes

Hendin (1982) talks about how the therapist's attitudes towards suicide and death and the therapist's relationship to the suicidal client are of great importance to the outcome of therapy. He asserts that certain therapeutic attitudes are helpful, while others are counterproductive.

The three attitudes that have a negative impact on therapy with suicidal clients are: the therapist wants to be a savior for the client; the therapist's level of self-esteem is contingent on whether or not the client commits suicide; the therapist fears that the client will commit suicide. These frequently unconscious attitudes result not only in a loss of awareness of what is actually happening in the process of therapy but also place the client in an untenable position. If the therapist's self-esteem is involved in the therapy and takes on the responsibility for a potential suicide, the client is put into the position of needing to live for another person. This situation also gives the client the possibility to demand certain behaviors from the therapist by threatening suicide.

On the other hand, Hendin asserts that empathy and compassion for the client and the client's situation are vital for the outcome of therapy, in particular for clients considering suicide. It is noteworthy that few publications on suicide, unlike those on virtually any other clinical problem, present "a sense of the

118

quality of the person's life or wish to die" (Hendin 1982, p. 170).

In other words, little notice has been given to the feeling

experience of the suicidal client. This tendency to be more

comfortable with abstractions speaks of a common therapeutic

distance and a certain lack of empathy.

Hillman (1990) says that the process surrounding suicidal thoughts

is in and of itself valuable. An analyst must support this process

and should not be hypnotized by the cultural pressure to rapidly

alleviate all suffering. Hillman says:

> An analyst may encourage his patient to experience these
> events, to welcome them, even to treasure them -- for some get
> better by getting worse. If he starts to hope with the patient
> to "get rid of" them he has begun to repress in a medical way.
> Some arrive at this place where humility begins only through
> the humiliating defeat of disease or suicide attempts, only
> through the organic mode. (pp. 159-160)

Hillman is in favor of aligning oneself with the process of the

soul. This entails that the therapist at one point has to let go of

applying methods and techniques, because "working on a problem"

implies that the therapist is siding with the hope for life. This

can polarize a client into the other side of wanting to end life.

Instead, the therapist needs to embrace the inner reality of the

client and to make space for a direct experience of the moment

without having to produce something else. Creativity happens at the

very moment when the therapist-client relationship is the basis of

mutual creativity (pp. 162-163). In this sense, the therapist has

to shift the assemblage point and has to open up to death as a

possibility.

119

## Experiential Knowledge

As mentioned, Hendin (1982) noted that there is very little literature which speaks directly about the feeling experience of the suicidal person. There are, however, a number of theories about why people attempt or commit suicide. The most common reasons cited as causes of suicide are: to escape from the common human condition; to react against another person or situation; to change oneself or sacrifice oneself for a higher good; and to risk life in an effort to enhance the value of life or achieve some other objective (See Maris 1981, p. 291).

There are many methods for committing suicide. Most literature agrees that the method one chooses has not only social but also psychological significance. This becomes significant in the therapeutic process. If the methods reflect psychic patterns, they are valuable clues about how a person might be able to shift their assemblage point without attempting or committing suicide. For example, a person who plans to kill herself with sleeping pills might be able to shift through learning to drop out of her ordinary state. A person who plans to shoot himself may be looking for a pattern of being more explosive or more direct.

One way to think about suicide is as a last and final attempt to shift one's assemblage point, to leave a place of unbearable pain and discover other possibilities. The concept of suicide as a need for and inability to accomplish a shift of assemblage point will become apparent in the following case story.

## CHAPTER 6: HEALING THE PAIN: CASE STUDY II

*When the curing is done, we remain lovers for the rest of our lives. We are closer than brothers and sisters, we are one in Wakan-Tanka. This love has nothing to do with physical things, it has to do with unity of heart and spirit and mind.*

*Fools Crow*

## Introduction

The following case reveals the therapeutic interaction between W and me. Over the course of our work together, love and our personal connection were crucial elements. W has attempted suicide several times and is again considering suicide. Shifting the assemblage point, even minimally, in the face of death will be a central concern for both of us. Death sometimes challenges us to expand who we think we are, to merge with our true selves and to open up to nature and the bigger spirit. Most people have had moments of fearing death, grieving over the loss of a relative or friend, wishing to be dead or being threatened by terminal illnesses, addictions, the environment and violence. People's relationship to death has many faces, some of which I will focus on here.

## Context of Therapy

I met W when she came as a client to a low income therapy clinic which a friend of mine and I developed. When clients first came to the clinic, they were assigned a therapist. Before I worked with W regularly, she had first worked with another therapist who left the clinic, and I had seen her when the other therapist was on vacation. When W first came to the clinic, she was not familiar

with process work methods. By the time of these sessions, I had worked with W for over a year and she had given positive feedback to movement work and to a feeling communication style on my part.

To protect her anonymity I will only mention a few aspects of her personal history and current situation. W is a white woman in her late thirties. Her presenting problem is depression, which has haunted her for a long time. She has been hospitalized after several different suicide attempts. She is on strong medication for depression and other symptoms. Physical and emotional injuries from severe childhood abuse trouble her. She would love to have a lover and partner. Her few friends struggle with their lives and are not always available. Currently she has no job. She has professional credentials and has worked in her field part of her life. She regularly meets with a doctor and a psychiatric nurse. I had worked with W once a week for over a year before her immediate crisis occurred. During her crisis, we saw each other more often.

## Case Presentation

I will present three video-tapes which were taken without any intention to write about them. I regularly video-tape myself for my own learning. Some events will be documented based on case notes. Verbatim transcriptions of each session are the basis for discussion. I will always present the beginning (approximately 15 minutes) and summarize certain sections in order to protect the client's anonymity, to keep the focus on the essential sections and

to describe movement and non-verbal processes. Comments on the process structure and our interaction will be regularly interspersed with presentation of the sessions. An in depth discussion of the findings will follow in the next chapter.

The tapes I will analyze are several years old and portray my development as a therapist at that point. I feel critical of what I did at the time. I often lacked insight and skills. I wish I had engaged in less talking about things and that I had joined the experience itself -- living the spirit of the moment. These sessions indicate my heartfelt desire to do process work, but they do not necessarily represent consistently fluid process work methods.

I'm interested in my interactions with W in part because I am still puzzled by certain things that happened. W deals with life and death issues not from a personal growth incentive but from a position of struggling for survival in desolate world. I want to learn what I could have done differently and to explore how I missed the moments of chance, the minimal shifts of the assemblage point, the invitations to step out of the immediate reality into dreaming. How did I get in the way of her process and how did I support it? I had to shift my assemblage point in order to meet her in the face of death. The experiences we went through are very personal and what I learnt from her is perennial.

**Session A**

Section 1

We sit in chairs and talk about our last session when my teacher was present to supervise our work. Her powerful body appears to be glued to the chair while she faces me.

S How did you feel after last week?

W That was wild; that was something else; that was a new experience. (chuckles)

S Was it a good experience for you?

W Yeah.

S You felt ok after?

W Mm.

S Great. I learnt a lot. I enjoyed it. I enjoyed going through you, am! (playful, making snakelike arm movements) I enjoyed going through you -- going through something with you! That's a pleasure for me.

W It's nice when I can be there for you.

S Thanks. I really appreciated it.


Comments

Lovingness is the vessel of our work and characterizes our relationship and our transference and countertransference. Fools Crow (Mails 1991), a Lakota shaman, goes even further with recognizing the love that connects people during the work and afterwards:

> When the curing is done, we remain lovers for the rest of our lives. We are closer than brothers and sisters, we are one in Wakan-Tanka. This love has nothing to do with physical things, it has to do with the unity of heart and spirit and mind. (p. 156)

My slip of tongue "going through you" reverberates the intimate connection between W's and my processes and invites a playful attitude. This irrational slip of tongue emerges in the movement channel ("going" and incomplete arm movements) and in the relationship channel. Later we will se later that my ability to follow my movements will create a beneficial shift in the work.

## Section 2

W (talks quickly and somberly with lots of pauses) Now down to the hard stuff! Well, I think I gotta go back and clean up that stuff around being dumped. And then I think I don't need to do that and I don't know if I think I don't need to do that because I don't want to dwell. (her face lights up)

S I think you are right. You don't need to do that right now.

## Comments

W is in conflict about how to deal with her situation. Part of her wants to get into it and clean it up and part of her doesn't want to get into it because she would dwell on it. Based on her words she is at least partially removed from dwelling while her mood and tone of voice indicate that she is partially inside of a drama. (She might say so if I would ask her). W is scared of getting stuck if she were to allow herself to deal with the stuff she is suffering from.

In part because she lights up when she considers not needing to go into the stuff, I support this particular direction, knowing that at another point she might need to focus on it. In this way, I

support her attempt to protect herself. One of the factors I also consider is: Does W have a metaposition? The answer is yes and no. She is able to debate how to deal with the situation, but she might not have an outside stance if she would let herself experience the stuff.

Another question I ask myself is: Does W have enough inner love and support to deal with the stuff? In trying to answer this question, I wonder about the nature of her commanding approach to herself, "now down to the hard stuff." While this directiveness may be the expression of her ability to be powerful and in control, her words and tone of voice seem quite harsh and unkind. I consider the potential of self-abuse in W's pushing herself to face things which she will use against herself, and consider that if I push her I may actually create an abusive situation.

In shamanism, creating the framework for going into difficult and deep experiences is important. This framework may be set up through performing rituals or through finding an ally, or helpful force, which can act as an outside perspective and guide. In the context of psychotherapy we may look for feeling attitudes and awareness skills which can serve as a vessel for the process. Sometimes, the process involves creating such a vessel.

At this point I am beginning to create a theory about W's primary and secondary processes. Her primary process is being dumped and

being at the mercy of something which she could dwell upon. Exploring what she might dwell upon may lead to a secondary process.

Instead of simply identifying with her primary process, she is involved in something like a dramatic production about "hard stuff." She gives a command to someone when saying "now down to the hard stuff." What is communicated here is something like "do it" or "focus on the hard stuff." It's interesting to note that W does not use the agent "I" in her sentence. This may indicate that she is playing a part of herself in the drama that is not her primary process -- there is no sense of a self who is speaking. A more secondary process might emerge from identifying with the sense of being powerful and in control.

Because W is deeply involved in the emotional aspects of her situation, I will have to join her and unfold the story through interacting with the different parts and attitudes while modelling new dimensions and metaskills. Before doing anything I wait for her to communicate more clearly where she is at.

## Section 3

W Because I've pretty much decided, by the way it went, that it's over. I like that. In fact I welcome it. So I don't have any feelings except for what she did.

S Mm.

W I was thinking a lot, lately, that I feel like giving up or why
I give up all the time and what makes me feel like that. All of a
sudden I've started giving up instead of trying. Like I've lost all
my faith that anything will ever work out.

S That seems like where you are right now. I feel like I hear a
slight trembling in your voice.

W Before I managed to go on and on. I don't understand why all of
a sudden I break down and I can't do a damn thing.

S Since when do you feel like that?

W Since a few years ago.

S Oh, since a few years ago.

W Ten years ago, eleven years ago I went through this whole thing
before and now I'm kind of going through the whole thing all over
again. I just give up and say there is nothing I can do. There is
nothing I wanna do too. I'm used to getting my meager existence.

S There is nothing! (slaps hand on her knee) Is there nothing that
you wanna do?

W (shakes head slowly, pauses, depressed) Getting in better
physical shape.


Comments

While W is trying to fight her depressed mood by figuring things

out, she is close to giving up. Her hopelessness is inspired by

issues and edges in her relationship life and also appears in the

context of her whole life story. She talks about past and present

moments of resignation. "All of a sudden I just break down"

indicates the possibility of being overtaken by hopelessness and a

somber outlook on life, i.e., an altered state without a

metacommunicator. The phrase "I break down" refers to a forceful

aspect of her process (as opposed to "I sink into a grey cloud")

which may need to be explored more.

The problem with breaking down is that W might experience herself as losing another battle of trying to make her dreams about life come true. The potential wisdom in breaking down is that by dropping out of her ordinary life she may find access to a lost part of herself or a larger perspective on life and death issues. Indigenous cultures have known since earliest times that liminal experiences can help people find lost souls or get in touch the spirit which is moving them (see Jilek 1974). While process work does offer methods to facilitate such processes, a practitioner's ability to invite disavowed and non-ordinary aspects of a process depends on the practitioner's familiarity with non-ordinary dimensions of experience.

I'm hesitant to address the lowest point, namely "giving up," because I lack a complete understanding of W's process and doubt my skills and metaskills to facilitate this process. I'm especially careful because of W's history of suicide attempts. Thus, I wait for something else to emerge which seems more approachable and something which might enable her to make a small shift which she could pit against her hopelessness. The need to access an experience which defies her hopelessness may contribute to my hesitance to address W's despair.

I try to approach W's feelings about the whole thing by addressing the trembling in her voice (double signal) which differs from her generally unfeeling tone. W does not respond to my intervention.

The reason is not necessarily because the direction of my intervention is wrong but because I don't relate to where she is. W doesn't approach her process from an outside perspective, which is a prerequisite for exploring double signals. Rather, she is engaged in the dramatic interaction between different forces and roles and has an inside experience of these forces. This is an example of where a therapist's and a client's assemblage point don't match. In this moment, I as a therapist need to change in order to embrace W's reality.

## Summary

Because relationship problems have instigated W's crisis we talk more about her social life. Suddenly, she expresses: "Social contact -- eeeek!" In the following interaction W elaborates on her experience more.

## Section 4

W I just can't get from here to there. I've been isolating my whole life. It's really hard for me to make social contact. Really hard! If this appointment would have enabled me to go to the dance lesson, I would have found a new reason.

S Oh, you couldn't go because of the time? I could have scheduled another time.

W I know, but what I'm saying is, that if it weren't this I would have come up with anther reason. I was working on "well, maybe I'm catching a cold and maybe I shouldn't go. (cheerful) I know I'm not catching a cold. It's like finding anything I can for an excuse.

S What about social contact?

W I didn't have it. The only time I had social contact was when my brother was molesting me, and his friends and the cousins. That was my social contact. Whenever there is social contact, I don't know, I'm terminally shy.

S Mm. (caring) What you call shyness, how does it go for you? (playing shy)

W Oh, don't do that. You make an ass out of yourself.

## Comments

Past abuse stories play a vital role in W's avoidance of contact and her inability to find and sustain fulfilling relationships. Her shyness is important insofar as she might not always feel that she can protect or defend herself in an abusive situation. I will have to watch her feedback very carefully because she might go along with things that are not quite right for her.

I try to validate and explore her shyness by asking her about her experience of shyness and playfully representing my mannerisms when I'm shy. While I hope to model acceptance of freely expressing feelings, her immediate reaction "you make an ass out of yourself" is unusually strong. At this point W's experience becomes real. Neither W nor I shift our assemblage points as individuals, but our interaction moves to a new level. The process is constellated in our interaction and moves away from thinking about experience to entering the stream of experience as it emerges in the moment.

As we will see in the following interaction, I'm about to become insensitive to W because I do not realize precisely how W's process

131

is constellated in our interaction. I don't know how to address her powerful statement "you make an ass out of yourself" without simply talking about it. Talking about and analyzing what people are going through often does not transform people's relationship to the forces they are dealing with and/or the forces themselves.

Shamans know that the forces which influence people need to be related to. If I were to take my inspiration from shamanism seriously, I might have said something like: "Oh, what a wonderful power you have. I'm so happy you protect this side (the shy part) from exposing itself too much. I sometimes feel shy because I need to be careful about getting into situations which are not good for me."

## Summary

We unfold the drama some more while I play a scared person. She orders me to not get that undone. She laughs and tells me several times that people like that get put in the home (mental institution).

## Section 5

S I don't want to go in the home. I'm just very scared.

W Hopefully you will not have to go in the home but that's where you will wind up.

S I'm very scared and you are a pretty mean person. (in a sweet voice)

W (laughs) Yeah, I can be.

S I didn't like that.

W I don't know why.

S You don't know why?

W Why I did it. I don't know why. (somber)

S Let's find out.

W (pausing a lot) Because if you're reaching out to people you always get hurt. If you reach out to somebody it's like alligators with no brain.

S You always get hurt. I'm not yet with you. I think I got a little hurt. (not anymore playing) I think I showed my whole fear, all that is in me and then you said I should go in the home. I didn't like that.

W I know it made me feel ashamed.

S I didn't feel ashamed -- oh, now that is real! I made you feel ashamed?

W Mm, about myself in this role.

S You feel ashamed before me probably?

W For the way you were acting. I felt it's me. I can't show that much weakness.

S You can't show that much weakness. (pondering) How come not?

W I don't like it.

S Really? What would happen?

W I get hit. I get verbal lashings.


Comments

Working on the issue of shyness in relationships is difficult because W deals with a lot of self criticism and internalized oppression as a result of having been abused and put down internally and externally. Thus, W perceives any attempt to address the psychological dynamics around her shyness as a criticism. Her

133

own criticalness surfaces in a subtle way. While her laughter and bitter-sweet sarcasm are powerful weapons against the oppression she experiences, I also experience them, at a certain point, as painful stabs against the shy part in her.

The question I ponder is: did the prolonged focus on W's shyness and the continuation of the role play shame or abuse her in subtle ways? What is shame and abuse? Abuse is not noticing when the other person is not able to defend herself if attacked (Mindell 1995). Shame is a painful emotion of disgrace aroused by the recognition that one has failed to behave in accordance with what one accepts as good (Webster's dictionary 1987). To answer this question I need to consider W's feedback.

What exactly is her feedback? Her feedback is positive in terms of this being the drama she is in and negative in terms of playing, because the roles have become real and personal not in terms of our relationship but in terms of our interaction and her psychology. Because I didn't notice that she felt internally ashamed, I contributed to prolonging this experience instead of addressing this issue.

This is a clear example of a moment where a therapist's and a client's assemblage point don't match. At this point, W is no longer a client in the traditional sense of a person asking for help. Rather, she is engaged in the drama that constellates between

her and the therapist. I'm still identified with my role as a therapist and continue to pursue the role play a bit longer. As a result W feels hit not only internally but also by my way of interacting with her. The next step will be to help her defend herself.

## Summary

When I ask W if she has been hurt by my insensitivity, she mentions that she was more internally hurt. I help her defend herself against me because I was insensitive and because her reaction to my insensitivity will counteract the possibility of her turning everything against herself and putting herself down for not being adequate. I suggest that she might say something like: "Stop, it's too much for me, it's hurtful to me, I don't like that, change!" She mentions that she is not too good at this at the moment. She also comments that she is becoming more able to do that and that next time she might do so instantaneously. I point out how fast she is changing, and she enjoys this recognition. Additionally, I bring to her consciousness how I've shared my fears and nervousness with her before we had a supervised session with a teacher of mine, and how she helped me with them.

I encourage her to make space for the feelings. W just wants to drop them. Long pauses characterize our interaction. She sits in her chair motionless and talks in a soft, grave, monotone. I move my chair closer and go inside several times. She tells me how she

got brainwashed for crying and making any noise while being sexually and violently abused while nobody intervened. She still suffers from chronic body symptoms due to neglect. She says that she is just telling her story and has no feelings for herself. While she is open to processing certain aspects and wants to try anything, she hesitates.

## Section 6

S Ok, let's take your fear seriously. What are you scared of?

W (shrugs shoulders) Things that could go wrong.

S What could go wrong?

W In this instant?

S Sure.

W (sighs and mumbles something)

S Bad? Ok, you're scared that it could make you feel bad. So I imagine it already does make you feel bad somewhere.

W It makes me mad.

S It makes you mad and it's already there.

W That shit that nobody cared.

S I understand. (gently) It makes me mad! I'm upset about it! It's awful! It's just plain awful that nobody cared about you. I would wanna tell them -- it's very painful. (expressive) I feel really bad. If I would have been there and if that would happen now I would say something.

W It was that way. Nothing is ever gonna change that.

S Yeah, that's awful. There are a lot of feelings inside of you.

W Mm.

S I don't know where to go yet, now.

W That's because (whispers something).

S Would you want to stop them?  Oh -- is this ok that I came closer? It's easier for me to be in tune with you. (puts her hands on W's knees, looks down and goes inside)

W Mm. (pause) I'm just thinking about, if I wasn't raped on a regular basis, how much different that it would have made me. I can only think the best thing to do is to kill myself. Because it puts me out of misery.

S It puts you out of your misery? I think it gives me the direction. The direction is to try to go out of misery.

W (nods, teary eyes)


Comments

W and I reach the point of not knowing what to do. W hits the lowest point and mentions wanting to kill herself to get out of misery. I drop my therapeutic mode and am simply present in my humanness, sharing my anger and suffering. This is an exciting moment where we both shift our assemblage points. Metaphorically, we are stripped naked. We are stripped from our sense of ability to deal with and solve the issues; we are naked in the face of the powers of life and nature. We have no choice other than to follow what is offered to us and to relate to something larger than ourselves which keeps going further and keeps us going. The only thing I have left in such a moment is to follow my irrational sensations, which, to begin with, means putting my hand on W's knee.


As mentioned in the chapter on shamanism, liminal and non-ordinary perceptions (see Some's encounter with a tree spirit) and the ability to open up to the spirit (see Fools Crow's focus on

137

becoming a hollow bone) are central concepts in shamanism.

In terms of myself, the shift's precursors are that I go inside several times (I pause, close my eyes, and look down). My body is asking me to do something irrational, namely to drop out of conversation and to simply relate to W's body energies. Because of my own personal history and psychology, it takes me a moment of being at a loss in order to open up to my strange and irrational sensations and impulses. I can only speculate that if I could have followed my irrational impulses earlier, W and I could have accessed what was needed more gracefully.

Summary

I stroke her knees gently and slowly, look down and go inside. I ask her again if she likes me to stroke her knees. I continue to follow my irrational impulses and begin to hum a strange tune which reminds me of indigenous flute music. The atmosphere is magical for a long time. I sit down on the floor beside her chair and put my arm around her shoulder. We sit silently for a long time. I remember the first time we met and the nice hug she gave me at the end of our meeting. Sometimes we whisper something and smile. Mostly we rest in a cozy way, in the quiet after a storm.

Comments

Hitting the lowest point can deliver new dimensions of the process and new metaskills in approaching it. One of the metaskills I found

is compassion not only for W's pain and anger but also for a disavowed aspect of her process, namely the need to soothe the pain instead of working on what created it, which characterizes my prior assemblage point. Another metaskill is the devotion to exploring non-ordinary sensations, imaginations, movements and songs, for example my impulse to put my hand on W's knee and to hum a native melody. This is an example of how following irrational sensations offers a way out to step outside of consensus reality. Body experiences are not organized by the conscious mind and can thus bring out natural wisdom.

Both process work and shamanism focus not only on the individual person, but on all the parts involved in the person's story. In shamanism, this is conceptualized as relating to the ancestors, spirits, and/or animal helpers of the person. In psychology, all these entities are considered "sub-personalities." This conceptualization misses the fact that the therapist and client are not working on the client's individual psychology alone, but are discovering and interacting with perennial forces.

In process work, the therapist appears to never sit with one person, but with many forces and spirits, such as the client's identity, "ghost roles" or less overt but present aspects of a client's process, and the eternal essence of the person. In this segment, W has feelings about the abuse she experienced. Present in this story is thus not only the adult woman who talks about abuse

and wants to deal with it in a rather unkind way, but a ghost--the child or adult who did not receive solace. Through following my body experience we contact this lost spirit, a part that hasn't been overtly present in the session but which needs attention.

The cozy atmosphere and some playful moments take W out of her misery which she wants to leave through any means possible, including suicide. If it had not been possible for W to shift emotionally at this point, she may well have continued to consider killing herself. This point of desperation, of not being able to get out of a miserable and stuck emotional state, is one from which people do commit suicide. An important question is, which aspect of a process does a person want to kill? In W's case, she doesn't simply want to kill herself, but to kill off or get out of a miserable state which her usual identity or assemblage appoint doesn't know how to change.

## CHAPTER 7: WHERE IS HOPE?: CASE STUDY II

> *Our souls aspire toward growth, that is, toward remembering all that we have forgotten due to our trip to this place, the earth. In this context, a body in pain is a soul in longing. To shut down the pain is to override the call of the soul.*
> *Malidoma Patrice Some*

### Death Poetry

Half a year has gone by. W comes into my office, sits down, slouches against a wall, and begins to read what she calls death poetry.

When I lost it last time I was afraid it was for good. I still don't know if I'll ever get it off of my back. Maybe I don't care anymore, maybe it doesn't matter anymore. I want to die. Life is not worth living at all. My pitiful existence is pathetic at best. Nothing makes me happy except love. If that's all, the be all and end all to my life, then that's not worth living. This's sorrowful, shameful that this is all of life that I can handle. I have much too little left. Then my living is for nothing. Why should I go on? I hate the pain of staying alive. Living equals never ending pain. Why should I stay alive when life is pain. Why would anyone want more of this. I have to be very sure I die this time, no doubts. I can't let them get their hands on me again. Living through another suicide is unthinkable. This must be avoided at all costs. Being me hurts with a shameful silence that could break your ears. There is something wrong with me, it's everything. I'm weak, dependent, emotionally unstable, codependent in every way. It's like I haven't learnt a thing in my whole life. Through all my experiences I haven't made one step forward. Just stood in the same place, never gaining an inch. I'm just as helpless as a baby and getting weaker all the time. I seem to be going backwards instead of making progress. I'm so ashamed of myself for deteriorating so far even if I can't seem to help it. And my existence to be so miserable is to have no more control. This is one long endurance contest. How much can you take for how long? She was born with incredible sorrow, the longest lasting, never-ending kind of pain. The kind of pain that breaks your heart with agony and heaviness, the kind you feel in every fiber of your being all day long, night long, every day year after year after year. She was born of depression; she was born of abuse. She was born to do just one thing -- die. When she could not take it anymore she should die. It was the only salvation, the only true cure -- death. Her heart bled every day until there was nothing left except the vast emptiness. That was left behind....

## Comments

W's letter explains her wish to die. There seem to be various reasons people commit suicide. One is from a certain reckless tendency, the spirit we see in teenagers who drive too fast, the risk that goes too far. Aside from this sort of impulsiveness, or from auditory hallucinations which command a person to kill himself, suicide rarely emerges from an impulse but rather from intense suffering and a huge conflict with giving up life. This conflict is quite apparent in W's letter.

The absence of love and a lover brings her to the brink of her existence. In our work, long dried up tears frequently emerge one more time around this issue. At the same time, I know that she has most frequently attempted suicide after bosses treated her unfairly at work. I can only speculate that love would carry her through her life, but she feels that she has no control over it. When she doesn't have that and can't even partake in other dimensions of life, she has nothing left. She has no control except over her own death.

In the letter, W's position towards her experiences changes many times. Present is someone who has hope in life ("afraid it was for good"), who is hopeless about love and life, who dismisses herself ("codependent in every way"), and who dissociates from being in the drama ("she was born with sorrow"). She tells part of her story in the present or past tense, switches into conditional tense as she

approaches the question of death, and finishes in the past tense ("when she could not take it anymore she should die; it was the only salvation"). W evaluates her life form the perspective of a story teller. Whom is she talking to? I think to myself that she seems to address the whole universe which has put her into an untenable position.

Something is chipping away at her and "her heart bled every day until there was nothing left except the vast emptiness." There are two ways to hear that. Regardless of what she goes through, W never gets anything out of it. On the contrary, she loses more and more. I wonder if there might be something important about discovering the vast emptiness beyond life and death. In Buddhist traditions this state is highly regarded. In some sessions, as we practiced dying, she has accessed these states to a certain extent and found some peace of mind. What makes it so difficult for her to unveil these treasures and spirits, the ones she is close to and which many of us neglect?

Consensus reality of our culture values only success in the world. While she has a "great need for safe space to be at home, not out in the world," she continues to say "if I cannot even walk around in this world what am I doing here?" The world is shaming her for what she does and doesn't bring to it. This is true not only for her but for many people who don't fit in a world of business and busyness. Mindell (1988) responds:

I know that you suffer from feeling unwanted. You are the identified patient of a troubled world family. We contribute to making you believe that you are a useless failure and I know that you secretly feel that life is not for you. You are partially correct when in your altered states you perceive that this world is in trouble and that you are in order. Your life could show us the dreaming element in the world yet we dwell upon categorizing you. (p. 172)

## Session B

Section 1

W hasn't moved an inch. The following interaction is characterized by long pauses. Her low, gentle voice is sometimes shaken by small ripples of emotions.

W Pretty fucked up, hem?

S (shakes her head, moves closer, holds W's hands)

W Every time I managed to crawl out of it, I know it's coming back.

S (strokes her hand, whispers something)

W (whispers something) It's too much for too long. I told my roommate yesterday that he should start looking for another roommate because I'm not gonna be here anymore.

Comments

W is suicidal. In such a situation, the most commonly advised practice is to report the client's suicidality to appropriate authorities, in this case her psychiatrist and psychiatric nurse. In Western countries, duty to report laws require counselors, therapists and medical professionals to report suicidal or homicidal clients. The goal of such reporting is to ensure the safety and life of the client or those threatened by the client.

W's state puts me in a difficult situation. If I tell her doctor and psychiatric nurse what she is going through, W might be hospitalized. I know from other conversations that W has been traumatized from past hospitalizations. In her letter, she says: "I can't let them get their hands on me again. Living through another suicide is unthinkable. This must be avoided at all costs." That's why W doesn't disclose her suicidal thoughts to her doctor and her psychiatric nurse. My dilemma is that if I talk to authorities she will feel betrayed by the only close support person she has, which will drastically increase the potential for another suicide attempt. If I don't communicate with authorities, I might get into legal difficulties if W does attempt suicide, which might have a long-lasting effect on my life. This conflict cost me many nights of sleep.

There are certain risks associated with breaking the therapeutic confidentiality and reporting a suicidal or homicidal client. Costa and Altekruse (1994) say:

> A client may not only refuse to become involved but may indeed become hostile and represent a threat to the counselor's safety. In some situations where immediate hospital and police assistance are not available, it may be inadvisable to confront the client. Another problem is that confrontation may push a potentially violent client toward committing the violent act hastily before the client can be thwarted. In addition informing the victim and police of the dangerous intent of a client may relieve the counselor of responsibility, but the danger to the potential victim remains. All too often, restraining orders obtained by the victims are violated, with harmful and sometimes deadly results. (p. 348)

In considering whether or not to break therapeutic confidentiality with W, I was afraid that she would kill herself. I decided to seek the guidance of my supervisors. In one of the following sessions I processed my dilemma with her. I told her that I needed to talk with her psychiatric nurse, would like her to be present, and would help her stand up for herself. I helped her bring out her reactions and to process them with me. Costa and Altekruse (1994) say:

> If the client's threats impose a duty to warn, Snider (1985) recommended that counselors explain their concerns to clients and attempt to obtain cooperation in warning the intended victim....In involving the client, integrity is maintained in the counseling relationship, and the counselor is potentially relieved of having to breach confidentiality. Another approach suggested by Herlihy and Sheeley (1988) consists of the counselor's inviting the client to participate by contacting the third party in the presence of the client. (p. 348)

There are similarities and differences between threats of suicide and homicide. The most obvious difference is that in homicide threats the third parties involved include not only the police and appropriate psychiatric authorities, but the potential victims of the threat. In suicide, the victim and the client are one and the same, and third parties are only police or medical people. However, the issues around breaking client confidentiality are the same regardless of whether the client is suicidal or homicidal. It is still a question of whether rupturing the therapeutic vessel will push the client into violence or will actually assist in preventing harm.

When W and I finally went for our appointment with the psychiatric nurse, W was very nervous. It turned out to be a very beautiful interaction and W had a positive experience in dealing with the social system. The vessel of lovingness and trust we had created for over a year held up. W was willing to do something that terrified her because I had requested it. In this case I feel strongly that because W had such a strong need for love and connection and because her trust had been violated so many times in her past abusive history, that choosing to involve her in the disclosure was the most ethical option. Simply reporting what W had specifically entrusted to me would have broken the trust. It may also have been a repetition of the disrespectful treatment that had led her to previous suicide attempts, which had consistently occurred after bosses at work had used their power over or against her. If I, as a therapist, who has more power than my clients, had used my power to betray her confidence, I believe this would have led to W attempting to harm herself and would have ended any potential for ongoing therapy.

With other types of clients, I might have chosen to report suicidal ideation to police or medical authorities. For example, if I were treating a person with paranoid schizophrenia who had begun to share that he was hallucinating being ordered to kill himself, I would inform police and hospital authorities. In this case, the person has access only to one part, the victim of the commands, and my ethical commitment as a therapist is to protect people from harm

until such point as they have access to more parts of themselves.

With W, we were actively engaged in the discussion around her struggle for life. The therapeutic vessel helps to contain that struggle and to support the client as she works with it. With W the transference around the topic of suicide is quite strong, and I have more confidence that the therapeutic vessel can contain the discussion around suicide. With a person with paranoid schizophrenia, the focus of the therapy is less likely to have been around a struggle about life and death. Therefore, when suicidal ideation or commands emerge, the therapy vessel isn't strong enough on its own to provide sufficient safety, and hospitalization or some other containment may be essential.

Similarly, with a borderline client, I would be more likely to report suicidal ideation, for two reasons. First, if a borderline client shared with me that she couldn't talk about her suicidal thoughts with other care providers, I would be concerned about psychic splitting. At this point, I would be in the dangerous position of being the "good" therapist, in opposition to the "bad" doctor or "bad" psychiatric nurse. In such a position, I would be bound at some point to do something which would upset my client, at which point she might be much more likely to cause herself harm.

Additionally, the transference of W differs from the transference of borderline clients. W has a strong positive transference onto

me, regardless of her feeling state. A borderline client is more likely to have a transference which shifts between positive and negative depending on her feeling states; thus, such a transference is not strong enough to contain suicidal ideation.

## Section 2

S I'm thinking you can't take it anymore, I mean it nearly breaks my heart.

W (wipes tears from her eyes) I'm just real tired of going through it over and over again. No matter of what happens, I'm gonna go back to this, sooner or later. (slaps hands on legs, points to her death poetry) The only thing I wanna do is die. No matter how good it gets between here and there, I always get back to that. I know another one is coming. There is no escape.

S (tears in her eyes) Is it good for you that I'm upset?

W Yeah. It hurts a little bit.

S It hurts a little bit? It's better to share it.

W I don't know.

S Why does it hurt?

W I don't like seeing anybody cry.

S Oh, come on.

W You know what I mean. (smiles)

S Yeah. It's because I love you.

W I know. (smiles)

S (lovingly) You shouldn't feel hurt, if I'm sad with you.

W (coughs violently, looks out of the window, somber) I don't know anybody who can listen to all that and not get bummed out by it all.

## Comments

W is utterly hopeless. She is tired of her painful struggles "no matter of how good it gets," and feels that "there is no escape." I suffer with her and don't know what to do. I respond to the situation by showing W my feelings, my suffering and my love for her while watching her reaction. W suffers a bit from seeing my tears, and she coughs violently after I mention my love for her. Focusing on how much I care about her and feel for her, a possible positive part in her life, makes her situation more untenable. First, neither I nor anybody else could ever be reason enough to live. Second, I wonder if she or the part in her that contemplates committing suicide feels shunned.

There is a certain forcefulness in W which becomes apparent in the way she slaps her knee and in her violent coughing. Rather than being simply hopeless she appears to wrestle with something. I'm at a loss because I fear that doing anything with a hopeful undertone will polarize her into feeling more hopeless.

## Summary

She sinks deeper into hopelessness and frequently stares either out of the window or to the right with an austere look. Long silences interrupt our interaction.

## Section 3

W   When I get really depressed, if somebody gets in my face it doesn't take me nothing to decide to hurt them bad. I don't know why this is, I just know that it is. It's with strangers or anybody that gets in my face, not you or somebody I care about. Then I think I shouldn't be here.

S   Because?

W   Because I'm afraid of what I do to somebody else.

(We have a short interaction about her temper.)

S   That gives me two possibilities or two things we could do -- not because it might change things, but I would do them just because it's happening right now. Shall I tell you? One thing is the temper; you are afraid of losing your temper; we could do something with that. And the other thing is: We could do something with dying. Or, we could do something with the hands. (W had put her hands into mine)

W   Dying.

S   What shall we do about dying?

W   (looks intensely to the right)

S   You are looking over there and something must go on inside of you.

W   I'm trying not to tell you my suicide plans. (wipes her eyes)


## Comments

W is afraid of her temper and what she might do to someone else. I am not because she has never turned her aggression against other people, only against herself -- attempting suicide is a violent, forceful act. All of W's unlived love and passion threatens to destroy her whole self in a vengeance. While she is not identified with this power, I hypothesize that her passion and love is even further away for her identity and that she needs her power to get there.

151

## Summary

W tells me her plans to commit suicide. I tell her that I have two reactions. One is to be upset and in pain about her suffering. I tell her that I'm stuck. Tears start rolling down her cheeks as she communicates that her only other choice is to hurt like that forever. I tell her that my other reaction is that I would not be mad at her if she did it, maybe just a little bit. She says that she doesn't want to be a burden for me but there is nobody else she can talk to. I take her hands.

## Section 4

S Are you thinking something?

W I'm thinking about you, having two heavy appointments in a row.

S (strokes her lower arm gently)

W Am I the whitest person you've ever seen or what? (laughs)

S (mumbles something)

W You're tanned compared to me. (smiles)

S I have this skin color.

W You do. I have no color, I'm like the whitest person.

S I have all this color, look at me.

W You eat your vegetables!

S That's true.

W My feet are this white.

S No? Are you serious?

W (enjoys the interaction) Yeah.

## Summary

We investigate our skin like children. I have dots from getting older and she talks about her dots as dried up tears.

## Comments

W suddenly begins to follow her childlike curiosity. To begin with, she is concerned about me and how I deal with what she presents to me. Her incredible heartfulness in the middle of all her struggles is very touching. From an analytical perspective, I wonder if she feels more related to me because, just prior to this interaction, I have expressed that I will not be mad with her if she did it. Thus, W doesn't need to be in battle with me about it. Also, I wonder if she is trying to ease the burden which she feels she puts on me. Maybe she picked up taking care of me because I occupy the role of struggling with the situation.

W's mood swing is amazing. She is nearly light-hearted. I could have picked up on W's childlike, irrational curiosity as a metaskill. I could have started, together with her, to create a fairytale or story about a girl who lived in the forest all by herself and encountered strange beings. At this point, I don't have an assemblage point which would allow me to dream and unravel my imagination. Instead, as the following interaction will show, I'm focused on ordinary reality and my limited sense of what it means to be a therapist--my ordinary assemblage point.

The ability of shamans to tap into unknown dimensions, to find the transpersonal stories behind people's experiences and to use songs or other rituals to invoke helpful spirits might have been incredibly valuable to W in this situation. While the concepts put forth in process work would have supported me to follow my irrational imaginations and impulses, my assemblage point didn't.

## Section 5

S I notice something like that. (shows it in movement)

W Stubborn.

S Stubborn? Against doing something?

W No. Stubborn, knowing I'm going to die.

S I see. The other side is something who says, you should live?

W No -- nobody is there saying I should live.

S So, stubborn against going to die or for going to die?

W For going to die.

S Whatever we're gonna do, I have to say, I'm not gonna suggest anything right now, because I'm on the side that wants you to live.

W I know.

S For the moment -- I might come out in a minute.

W (coughs violently)

S Maybe I should sit down beside you.

W It's painful and I'm fucking hopeless.

## Comments

I can't go on working with W. W is stubborn about wanting to die and I'm stuck with wanting her to live. Anything I do will carry

the flavor of trying to change her and will increase her stubbornness about dying. Because I fear that W will commit suicide, I want to preserve our bond. I decide to eliminate pressure and to sit down beside her and bond with her. My immediate concerns are: How can I provide a pot for her to deal with the question of life and death? How can I support her to be stubborn and to stand up for herself? Her stubbornness against living an unbearable life seems important in the sense of needing to stand up against people and forces which make her life miserable.

I am stuck in one particular assemblage point which is concerned with being a therapist trying to change W's fate. Because I'm afraid that W might commit suicide, I'm desperately trying to avoid a wrong move. I'm hypnotized by her hopelessness. My preoccupations with fear make it impossible for me to follow W's process for the rest of this session. For example, I'm unable to pick up on W's stubbornness -- a power which she might need more of in order to ward off adversarial encounters in life and in order to create the life that is right for her.

In retrospect and based on a session with my therapist I realize that I couldn't deal with the presence and possibility of death. Otherwise I would have been less concerned with finding sparks towards living and more open to exploring W's connection to suicide and death (see Chapter Eight).

Summary

I try different interventions along the lines mentioned earlier. We
unfold her imagination about killing people and W comments that
afterwards "I just walk away like nothing ever happened." While we
leave this path, too, there is a nice atmosphere between us. She
links her imaginary incentive for killing with having control.

At one point, W mentions that a part of her is not here, but dead,
gone, out of touch, over there, and too far away. She describes it
as the part that can be happier, wants her to have fun and to enjoy
it all. It disappears when she is depressed and it's waiting for
her to get out of the depression. I conclude that suicide might be
an attempt for her to get out of the psychological system she is in
and to access this other part of herself.

## CHAPTER 8: FACING DEATH: CASE STUDY II

*You need to realize and respect something besides your present identity as your teacher. The ally is a teacher that, while a friend of our ordinary mind, is the symbol or expression of an altered state of consciousness. The ally, you could say, is a bridge between the worlds.*
*Arnold Mindell*

Comments

Personal therapy, supervision and deep contemplation have inspired a significant shift in my assemblage point. In my previous assemblage point, I suffered many sleepless nights. I worried about W, felt responsible for her living or dying, and simultaneously felt that there was absolutely nothing I could do that would guarantee that she would not die. My previous assemblage point saw her life as my responsibility. After struggling and suffering and doing my utmost to help W, I had a moment of surrender when I realized that it was not in my power to ensure her life.

Mindell addresses that the moment of shifting the assemblage point, too, is not in my power. "All of this is not up to your will.... Inner and outer teachers may spur you on, but it is finally up to the spirit to move your assemblage point.... Waiting for this special move is both sobering and challenging" (1993, pp. 6-7). This was truly the case in my work with W. It was only after I tried everything that I could do, and really hit the bottom emotionally, that the spirit shifted my perspective.

While I naturally continued to feel responsible to do as much as I could, I began to carry a deep sense that anything beyond that was not only up to me but to nature and the spirit. I realized that feeling directly responsible for whether W was going live or die was an inflation. Life and death are much greater than my intentions.

## Session C

### Section 1

We sit quietly for a minute. W's face has a grave expression. I reach back for my pad and roll flat on my back. We both have to laugh.

S (remains on her back, in a childlike voice) I don't wanna work today. I just wanna play. I just wanna fall over. Can we play?

W Sure. (smiles)

S Can we just play? (sits back up, moves her arms wildly) Maybe we should just play this time. But let's first figure out where you are at. You just saw where I'm at. (we both laugh) Sounds like "mommy can we play?"

W (yawning) We did that at the same time. (we slap high five) Well, where I'm at. I'm having a lot of conflict inside. Thinking about should I die or should I live. I wasn't having the part that wants to live come up at all until just a few days ago. So that's going on inside of me.

S Which part came up a few days ago? The living part?

W Yeah. Real small suggestions, like maybe things can work out and this kind of crap. (voice fades) It's just been going around and around in my head. I think about dying last thing I go to bed and think about it the first thing in the morning when I wake up.

### Comments

The playfulness I literally fall into is a wonderful change from the grave mood which permeated the previous session. W seems to

enjoy the crazy wisdom of play and is open to it in a most loving and warm way. At the same time, she is conflicted about wanting to die or wanting to live. She identifies more closely with wanting to die, while living and fun are further away form her identity and emerge incidentally. Her impulse for life emerges in her openness to play and in internal voices supporting her to choose life. These small suggestions just come up; nature offers them. Her process and her attitudes don't allow her to embrace the these voices fully, and she calls them "crap."

As we will see in the following interaction, I refrain from relating to the voices which suggest that things might work out. Because I actually side with them, I fear that I will polarize W to take the other side and identify with the part in her that wants to die. Thus, at the moment, I am not able to validate that having this conflict is worthwhile.

## Section 2

S What do you think?

W (resolute) I wanna die.

S So, like, I was laying in bed thinking I wanna die, I wanna die, I wanna die, I wanna die. Something like that?

W Mm.

S Why don't you?

W Die? I might. Why don't I do it today? I don't know. Because every time I've done a suicide I planned it out. And it's not like something you do in a couple of days. It's something you do about in a couple of months to six months.

S You mean you are planning things? Or you experience yourself not planning?

W Yeah, part of me is. I've been calling up and seeing how much it costs for a cremation. Things like that. And I was gonna prepay that. Stuff like that.

S Did you prepay it already?

W No. I'm just calling up and getting the cost.

S So what shall we do before you die?

W Well, I was gonna wait till the summer is over because I hate winter. I was gonna wait till I got...

S Why wait?

W Because I hate the winter, and I know all the stuff that happens during winter with my depression. And it's like, I don't wanna face it anymore. I don't want to go through that again. I don't know.

S But summer will be better.

W Yeah. Usually.

S Usually, how about now, how about this time?

W I don't know.

S You don't know?

W I was kind of gonna take it as it comes.

S So let's imagine you will die in six months.

W Okay. (slight twist in mouth)

S Let's plan it then.

W Why? (pulls her feet up, fidgeting)

S (goes inside) Because it's impossible to go through another winter, it's too painful.

W Mm. (long pause) I don't know. This's something I internalize. I never would externalize that.

S Now let's externalize it.

W I know it's always been internalized. (holds up her head with her right arm which rests on her leg, takes a deep breath)

160

S What's happening with you when it's externalized?

W It's a personal and a private thing that other people shouldn't even know that you are going through it, let alone participate. It has to be that way for self-preservation. Even when you try to kill yourself, self-preservation, it's a joke isn't it?

S I'm not following. I'm like completely lost.

W (laughs out loud) Okay, it's like, I never tell anybody what I'm gonna do. I don't share my plans with anybody. It's always been internal, and I've never let anybody be a part of the planning process or decision process or anything. (somber, shakes her head)

S Now it seems to be a little different.

W Because I let you know.

S I'm not planning it but I'm here.

W Yeah, well if I plan it I plan it by myself. (turns more depressed) I don't really...

S So, why don't we plan it together?

W Because I lose control that way.

S To me?

W To let anybody know.

S You lose control?

W It's always something that I can't share with anybody. I can't tell people that it's going on inside of me.

S It's an interesting statement. I'm still stuck. I'm a little slow today. I'm still stuck. You say "I lose control."

W (pauses) I know, I'm kind of confused about it myself.

S So let's stay there. There is more to that. That's great.

W Well, when I do it all myself I can change my mind as to the date or the destination or... Sharing the planning process with somebody else is like... Okay, the reason I don't ever share this with anybody is because they'll lock my ass up and that's why I never let it out where I'm gonna go and what I'm gonna do. (sits more upright and sounds less depressed)

S And then there is this other thing around the control I hear, and then there is this thing you said, that you lose control.

W The reason is because then I get locked up. And that's total loss of control.

S Yeah, but wasn't there something that you felt like if you plan together with somebody else you lose control because you can't change the plan. Is that right?

W Mm. Maybe.

S You think if something is happening it's set. You can't change it around.

W Well once I get my word on something I like to stick to it. I haven't been as good at that as I planned.

S Why not change it around? Why not break all the rules? You can make your own rules. I'm not for or against anything.

W Yeah, I know. I don't know. Hmm. Because I'm not sure whether I am or not.


## Comments

The quality of our interactions differs from our last session. The reason is that my assemblage point has changed quite drastically in the meantime, as mentioned earlier. At this point, I am unsure whether or not W will actually kill herself. I have shifted enough internally that I am willing to consider her death as a possibility. If it is to be that she kills herself, I want her to go into that decision prepared, with an opportunity to finish up anything in life that may be unfinished for her. With this in mind, I feel it is important to explore her plans and to really discover where she is in relation to wanting to die.


W reacts to my change in attitude and approach in an interesting way. To begin with W is strongly identified with wanting to die.

When I ask her about her plans and challenge her to face them, W is reluctant to focus on them and seems to become less sure about planning suicide. After a couple of minutes, she brings forth that she associates killing herself with having control and that sharing her plans is associated with losing control. W says that her potential death is the only thing she has control over, and that part of the control involves planning her suicide attempts alone and not letting anyone know and disturb her in what she is thinking.

Generally, W doesn't easily identify with being able to take control of her life and sometimes doesn't realize the extra stretch that is within her potential -- after all, she has survived all her suicide attempts. In the course of our conversation, W shifts her mood and stance. She is suddenly discussing the psychological dynamic she experiences around suicide and in interaction with me. W points out that our culture forces her to internalize the whole struggle and doesn't tolerate or support her in facing death. She has been locked up after her past suicide attempts and feels traumatized by her experiences in psychiatric institutions. In the way she talks about her experiences it becomes apparent that she feels less at the mercy of her process and comes more from a sense of being in charge.

One inconspicuous interchange is interesting to me. When I say at one point that "I'm not planning it (suicide) but I'm here" she

163

becomes more depressed and responds with "well if I plan it, I plan it by myself." I conclude that if I slightly pull back from joining her on the issue of planning suicide, she sinks deeper into a depressed mode. My speculation is that she needs someone who, metaphorically, is embarked in the same boat as she is. She might need someone who is in tune with the most extreme manifestation of her experience, namely her suicide plans, and someone who challenges her to face the conclusions. Through staying close to the lowest point, any movement which leads further will emerge from W and not from me. This can offer her a sense of personal power.


## Section 3

S You are not sure whether you are or not...

W Gonna die in four months.

S It's true nobody can. You can't be aware of it before. But why don't we assume it to finish the things to do. I understand, nobody knows, life is weird, it has an irrational streak to it.

W Yeah.

S Why do you laugh about that?

W Totally! (laughs) It's kind of sarcastic. There is more irrational than there is rational things. And it's like people look at me and I have an irrational life because I don't have a job.

S (playful, joking) Oh you are the one that makes life irrational. Oh here, I found you! I see.

W (smiles) No there's just irrational stuff all over the place. It's like we have two roommates and now we have three, it's like -- change anonymity.

S Oh, you can't do it! You gotta be normal.

W No I can't be normal it hurts.

S Come on, you gotta be normal.

W (laughs) It hurts when I try to be normal, it hurts.

S But you gotta be normal like everybody else. What are you doing? You feel like a freak.

W (smile, chin in the air) I'm doing the best I can.

S You gotta be normal.

W Then I have to go back to work.

S Yeah, you gotta work. I mean you can't just do nothing and sit around, like you are a lazy bum.

W I've been doing just fine. (chuckles)

S But I don't like it. You look okay, that's true. You look perfect, you smile, you're like incredible. But I don't like it. I have to work every day.

W (more somber) I know.

S You have to work every day, too. I just work and then I work for you. You just suck on me.

W Don't say that to a lesbian! (cracks up completely and we both have a good laugh, joke around for a couple for a couple of minutes)


Comments

W has an incredible ability, when everything is at its worst, to laugh about it all. The atmosphere is wild, crazy and fun while we mock the game of normalcy. It gets serious for a moment when I get too close to portraying social reality. (She has been in many hurtful interactions with people who are resentful about having to pay for people on welfare). The crazy, irrational laughter comes back even more strongly when W inadvertently associates a sexual context to a particular word I used. Is there more than living the waves of the process where tears topple into moments of free and ecstatic laughter? Can we hold on to this or any state?

Summary

The wave flows back into the pain of not having a lover, not understanding the purpose of being so alone all her life, and not being able to live this aspect of life. I tell her that I don't know what to do and W responds that this may be her task in life. We sit in silence while she squashes her knuckles. I take her hands, notice them tremble, move closer and vocalize caring sounds. She tells me that it hurts so bad and I respond that I feel like her mother, a different kind of mother. Tears roll down her face. I mention how gentle her hands are and she refers to other people saying so too. Her scars on her wrist and on her knee invite her to tell me more about her abusive past while I take care of her scars by touching them gently.

## Section 4

W That's why I tried to kill myself. It's because I turned my anger on me instead of other people.

S Right.

W And so that's kind of where my attitude comes off as saying get over it and move on.

S But there's still the anger there. You think that's a good attitude.

W Yeah. What they did shaped who I am, shaped my personality and I never can know what it was like to grow up and not be abused. I'll never know what that feels like or what kind of person I would have been.

S Your anger, is it still there?

W Yeah.

S Where is it?

W Sitting on top of my heart.

S Sitting on top of your heart, like how?

W Like a weight.

S Like a weight, like that. (shows with hand movements)

W (pauses)

S Can you show me?

W No, it's just kind of a visual thing. There is a ten pound weight tied to my heart, pulling it down. (shows with hand movements)

S Oh, like that.

W A big weight on it.

S Big weight on your heart. You feel it now.

W (nods)

S You feel it? How does it feel? Is there more or is there ten pounds, it's tighter or it puts you down, is there more to it?

W It's hard to breathe.

S Hard to breathe. So it must press also inward a little bit. Right? (W nods). If you were to make me feel like that and you could use your hands, could you try that?

W Put your hands up, this to each other. (shows me by doing it to my hands) This feels like that all the time.

S (we both focus on the movement process) Pressed together, it cramps the heart, and it pulls down, and it's really steady, like I'm a stone.

W Every time I dive into the pain, it's like that. And a lot of times, when I don't dive into the pain, it's there.

S Now how does this feel towards the heart. (I give her just enough resistance to feel what she is doing)

W There is just a weight there.

S Yeah, go ahead, a weight. Press down and be the weight. Yes. (the pressure increases, she ask me if it hurts and I shake my head "no") Mm, I try to move up and you try to move down.

W (yanks my hands down)

167

S Yes! (excited, we both laugh) What was that?

W Just showing you I can pull down a lot harder.


Comments

W's assemblage point has shifted. She is able to explore, track and unfold a body experience. It is a dramatic change for W to be able to follow her own irrational body experience and discover something new. What she calls anger is actually a physical force manifesting in her body. W describes her anger as a ten pound weight which makes it hard for her to breathe. W and I enact the pressure of the weight with our hands and arms. W presses down and I resist. Suddenly, W yanks my hands down in one irrational move and we both break into laughter. W radiates a sense of power and glory. Thus, W begins to retrieve a missing piece of herself, namely her personal power, through exploring the body experience. Our work is beginning to transform her anger from something potentially hurtful to something helpful.

From a conventional psychotherapeutic perspective anger is often looked at as deficiency which needs to be managed or as a reaction to oppression and abuse. From a perspective inspired by shamanism, a possible existence of another dimension to the experience of anger is recognized. The force behind anger and other difficult experiences can be turned into an ally, a helpful power. The disturbing force needs to be explored and wrestled with until it is transformed and gives us its secret message, namely useful

information and creative energy (Mindell 1993).

Another perspective comes from Dzogchen, a secret Buddhist tradition. Seeing right through strong emotions such as anger can lead to a deep realization of the energy behind life and its electric manifestation (Sogyal Rinpoche 1992). Process work recognizes that these various dimensions can emerge naturally when working with people. A person's process indicates which level to focus on.

What has enabled W to shift her assemblage point and unfold her irrational body sensations associated with anger? This is a mystery and a gift of nature, and I'm grateful for it. Certain factors may be significant. W has a metacommunicator, is not possessed by an internal conflict, is not hopeless, and has a somehow ruthless and compassionate attitude. What happened earlier in this session may have helped this shift to manifest insofar as W shifted from being identified with wanting to kill herself to taking an outside view on the issues of control which she associates with killing herself.

## Summary

We go back to pushing and get up for a wrestling match. The atmosphere is filled with fun, play, joking and laughter throughout. First she acts out her fantasy to grab my knee with her leg, pull me up and throw me down in slow motion. Then we go for it with quite a lot of force. She gets under me, lifts me up, and I'm

on the floor again. This time I try to pull her head down, upon which she comments: "Trying to move a rock, hmm!" I tell her that I like how she takes care of me, because everybody in the room knows who will win. I encourage her to not right away let me go, but to keep her grip and go further instead of taking care of me. We try to push or pull each other off balance and circle around each other. Again she challenges me: "Can you move the rock?" I challenge her to admit that she will win and she replies: "I figure I probably will, one way or another. I'm kind of competitive that way." In the final round, she picks me up and twirls me in circles. I hold up her arms in a winning position and tell her to look into the camera.


## Section 5

S Before we go away, I love the wrestling between us, but I wonder how it is for you, I see, I mean this intensity in your face is something I've never seen. The eyes go out of your face. They're out here you know. You feel like it.

W People tell me I can throw daggers with my eyes.

S You can win a fight just with your eyes.

W That's what people tell me. It's like when you get mad I can't even look at your eyes because they are just, daggers are flying out of them. And that was, I wasn't even mad.

S Wow! Wow, you weren't even mad.

W So they haven't seen that yet.

S Goodness gracious, you are incredible. You are powerful. Now I'm wondering something. That -- physically. . . (makes movement) You, that's what I feel. You are not just strong physically. And then all your internal power is so strong. And I'm wondering how you could use that in your life, with people that you have trouble with.

W Tell them to wrestle? Okay, let's wrestle for my raise now?

S "You are in for a lesson!" But in the end that doesn't change them yet. So I'm wondering how we could use that power when you talk to somebody who doesn't wanna give you enough money. The last job, right?

W Mm.

S Okay, so I'll be the boss. Since when I look at you you are like full power. Okay, I'll just make it up and you correct me if something is wrong and you react however you want. No, we can't give you a raise.

W Why? I have done the work.

S You have done the work and the work is okay. But it's like good, it's nothing special.

W It's double what my boss did.

S But I don't think it's true what you say, I think you lie.

W It's on the paper.

S Hum, I checked the paper, I don't think so. I think your perception is wrong.

W I have a copy.

S But that will not change anything anyway because we will not raise your wage.

W If I did two hundred percent of what my boss did, it still doesn't justify a raise?

S Mm, no.

W How do you justify that?

S Mm, it's just, we don't have to justify ourselves. We just do it.

W Okay. Then I can always go work someplace else or go live someplace else.

S So now comes the task. So far so good. Now something is missing. If you use all that intensity, feel the intensity and feel the intensity in your mind, in your eyes and in your whole being. And I give you some time and you feel it. And what thought would come?

W So you don't want people to work for you that can do the output I do with the quality I do. That's what you're saying, you're just gonna let the good people go, because you are not gonna give them a raise, because you say 200% isn't special? That's like letting somebody that's really good and has a potential for doing a lot of business just walk away because you won't give them 50 cents or a dollar an hour.

S Hum, I don't know, I mean (whispers something).

W I don't know, I never said that to him.

S Oh, I see. We are already way out of what you're saying. Because on this side I'd probably be for profit. I probably would consider.

W Yeah! And you can always get somebody else for what you are looking for. You can get somebody brand new out of school, that you can pay the minimum wage to, to figure out whether things are right or not, whether they are on time or not, whether it's quality that you want, whether it's gonna piss off your customers or not.

S I notice when you talk to me about you putting out so much work, being really good, and being really out there, I'm starting to slowly think. You know, the last thing made me think when you said, so you want somebody to work about half as much as I do. Good job, good job!

W Thank you. I always back down instead of making confrontations. I run away from confrontations.


Comments

W reaches one central edge, namely to use her powers in relationships in a way that transforms the other person. In this role play it takes only a small reminder, namely to remember her powers, before she pours out with a convincing statement. She addresses the business interests of a boss, his primary process. Instead of only asking him to justify his behavior, W also communicates in a way which grabs the boss's attention. This changes me in the role of the boss. At this point, instead of walking away and thinking about suicide, W gives a very short and

passionate speech in which she puts herself in the right light.

The reason she could do that was because she was fully identified with the experience of being powerful through finding her power in her body. If that had not been the case, it would have been too early to invite her to explore power in relationships. It was important that she had a strong sense of her power which she was able to access in a second.

This session is an example of how the problem itself can hide the power to solve the problem. W's potentially harmful anger hides the sense of invincibility and power which W needs to transform her life and the people around her. This experience parallels innumerable accounts of shamanic healing and training where a person's illness becomes a gateway to finding a vision or an ally (see for example, Black Elk and Lyon 1990). Process work offers the methodology to make these powers visible and manifest through unfolding people's immediate experiences and sensations.

Summary

W emotionally and expressively recounts a fight she had the other day in which she backed down. This time she plays the other person first. It looks like a standoff. While she thinks it's not such a big thing, I tell her that small things accumulate in the body and in the head, as she adds. Then she plays herself and I play the other party who doesn't move an inch. She replies: "Okay, I'll tell

you what we do -- we'll flip a coin." She experiences this solution not as backing down but as a compromise and as coming up with a solution. She expresses her wish to do that well in public but agrees with me that to do what she did today is not that difficult. She enjoys me celebrating her as a big winner.

## Aftermath

A couple of weeks later W tells me that she had a fight with a friend. She did something upon which he got angry. She is still upset about it because he is the only friend she has besides me. She experiences these relationships as the only things in life which are working out for her and which keep her alive. She reads me an apology letter to her friend. She takes the whole fight on herself and relates it to her inabilities. I talk with her about it and simply tell her that a relationship conflict is never only one person's doings and that he isn't an angel either. W agrees and voices criticism she has about him. I take her side and point out how her reactions are justified. Upon that, she notices that she doesn't feel totally bad about herself but experiences herself in a middle position.

A week later, she appears completely changed as she steps into my practice room with the book The Road Less Travelled, by F. Scott Peck (1980), and a notebook. She just wants me to listen to what she has discovered during the past week through reading and introspection. She is not interested in working on anything and if

174

I go in this direction she calls me on it. She is totally firm with me about wanting to analyze how her childhood impacts her experiences in the present. Her power is beautiful. I have to work on myself to open up to her deterministic (potentially pathological) stance which includes that after her abusive childhood it is extremely difficult if not impossible to create a good adulthood. Because she comes across like a psychiatrist, in her own right, I engage her in using her scientific mind.

W's assemblage point has shifted drastically. She picked up being her own therapist and assumed the position of an observer in a revolutionary way. I don't know what enabled her to change so drastically, except that she grabbed the chance when nature offered it to her. I wonder if hitting the bottom just a couple of months prior was a significant precursor. Just as in the previous session, I followed my impulse to not be a therapist but a friend throwing in a couple of my thoughts about her relationship conflict. One of the problems was that she saw herself as deficient and didn't hold the other person responsible, too. If I had worked with her on her psychology I would have supported her in feeling that she is the problem. I also didn't address her upsetness. I just attempted to set the record straight by looking at the other person, too. I modelled looking at the whole picture.

Several months later she mentions that she might like to become a psychic. I encourage her to use her abilities on me and tell her

that I am trying to determine the exact focus of my dissertation. She says that she sees what to do and asks me if it could be a case study. She refuses to be more specific because she wants me to believe in myself. Now, much later, she admits to having seen that my writing would be about our work together.

Half a year later we finish our work together. She is in a minor emotional turmoil about her life. She doesn't want to focus on anything but simply to go about her life. We still check in with each other once in a while on the telephone. I know the strongest thing I have done for her is to offer my friendship.

**Interview**

The following interview was taken just before I started to write my dissertation.

S Which are the forces you are working with?

W I try to get my mind and body in synch so that I can do things that are good for me, so that I learn to treat myself with kindness instead of criticism. And I try to learn to be true to myself and to listen to my inner voices telling me what's right and wrong. The more I trust that, the more accurate it gets. This weekend I thought of a friend. I called her and she really needed help. I trust the inner voice.

S Is there something visionary about you?

W The inner voice is a bridge to the inner spirit. And you're better off using the guide than when you fumble along yourself.

S Since when do you have the guide?

W Remember the premonitions I had about a friend who was going to die? I knew this a year ahead of time and I knew how. I saw the whole thing. So I saw the death of several people and how they died ahead of time. I had all that information and I could not do any good with it. There was no way to change things and there was no

way to help people with it. And I told God, "I don't want to know anymore."

S Then what happened?

W I pretty much blocked the premonitions out and when I had them I said "no, it's not true."

S Do you still have them?

W I turned them back on. This is really weird.

S What has helped you open up to the voices?

W Watching my friend and seeing how she uses it as a defense mechanism. Seeing somebody use it in a constructive manner whereas before I didn't know how to use it. Now I can deal with it. And everybody has it.

S Do you sometimes have trouble around it?

W Only if I don't listen to it, only when my mind tells me that that makes no sense "no that's not right," if I follow logic instead of the voice. It's not verbal, I don't hear a voice. But all of a sudden I know. It's a feeling, instinct. It's quicker than thought. It's just there.

S How do you trust it?

W Trial and error. You do that a few times and then I say maybe I better listen to it. Say you're sitting somewhere and you don't know whether you should leave or stay. Then you just open yourself up. You ask the question to your inner self: Should I go or should I stay? Then you are just open to the answer to come. You just leave yourself open. Either you are drawn to going outside or you stay and maybe meet somebody or something good will happen. It's like a pressure that pushes you down or draws you towards the outside.

S How do you manage to be open?

W Notice the thing. You force your brain not to think and not to make judgements. You are just open to feeling and sensing things and don't make judgements and rational thoughts. You just get in touch with feeling things instead of thinking things.

S When do you have trouble with that?

W When I'm out of balance. When I got a blender thing going inside and all my emotions and thoughts swirl around really fast. I'm not able to focus. I think it has partially to do with PTSD (Post-Traumatic Stress Disorder) and depression. Naturally when you have

that going on you can't focus on any one thought or emotion. You can't separate them from what is going on, from your inner voice. But once in a while it still overrides and I hear it. Sometimes I know I want to go somewhere but I don't know where.

S What do you do when you are in a blender? How can you regain the ability to access the voice again?

W Why I have the blender I don't know. Some days it's just there and I'm just emotionally overwhelmed. I basically wait it out. I go to sleep and hope I'm not like that the next morning.

S Can you access the voice when you are in a deep depression?

W Sometimes the voice is involuntary and sometimes voluntary. You just request it and sometimes you ask a question. Sometimes there are a lot a negative thoughts going through my brain: I want to die and this existence isn't worthwhile and my life has no meaning. I should just die so that I'm not a burden to society. When I'm in depression I have black and white thinking. The black thinking is that it is all black. The white thinking is neutral or good. Obviously in depression it's all black.

S What do you do then? How do you move with it or through it? Is anything helpful?

W I'm sure I have some control. But when I'm in it, I think that at certain points my subconscious takes over and I have no control. But that is my black thinking, my thought patterns. And something guides me out of it. This thing, I call my little saboteur that makes me live through suicide attempts. Consciously I'm not that much aware of what I do. My brain just goes: I can't handle this life, it's too painful. Maybe between you and me, I wonder if that saboteur and my subconscious are the same; they seem to have the same goals. But you see you are not supposed to hear the subconscious but I hear my inner knowledge given in a nano-second. You know how you have a body and the spirit. Maybe the primary process is the body and maybe the secondary process is the spirits. I think the voice is really wise because it's a secondary self and it has been around much longer. It could be thousands of years and maybe that voice is just a guide to help it through life. You know Pinocchio and Jiminey Cricket was his conscience. He sings a song, let your conscience be your guide.

S Last Fall something shifted. What happened to you?

W Well, when you read that book it gets really specific. If you do this to a child then the child will be like this. It said it in so many different ways because a lot of different things were done to me. I saw how I got screwed up. I never knew what exactly it was that my parents did. It gave me really specific answers to the damage that was done to me. Not having anybody tell that to me but

having a good book written by a doctor and reading it alone made me understand. Whereas before it was all general, it got real specific. It validated things inside of me. It was just between myself and what I read. There was nobody there to prejudice me and to tell me I was wrong or right. It was not about blame, it was about understanding. It helped me to get over the blame which I haven't focused on for quite a while. The damage is already done a while ago. It's not gonna help me to keep on blaming others. But it does help to specifically understand the complexities of my physical illness. As you saw me I got real focused on these points while trying to heal myself or to minimize the damage that was already done. I came away with a better understanding. It's kind of frustrating, too, because you think if you have all the information you could just fix it. I found out that you can't. You can fix some things but not all things.

S How does that make you feel that you can't fix it all?

W Well, everyone has assets and liabilities and I just have different assets and I just have to understand and work with them. I need to know myself, what I can handle and what I can't handle and to exclude those things from my life as much as possible.

S When you talk about that you seem to take care of yourself.

W I call it being true to yourself and not subjecting yourself to things that are harmful to your psyche and the nervous system. It's treating yourself with more kindness and love.

S Where did you get that from?

W I didn't have it until very recently. I've had it since I started working with you. It came on and it got stronger and I suspect it's directly related to the unconditional love and acceptance you give. If somebody else can feel that way I'm worth feeling that about myself. It took a long time of doing that before I could do that to myself. But that's what I attribute it to. Because you always treated me with ten times more kindness than I treated myself and you never stopped, you just kept hammering me with it. It took a long time for it to sink in, but it did.

General Comments

My work with W deepened my realization that many things are up to

nature and the spirit. It was not up to me as a therapist whether

W would live or die. At a certain point in the therapeutic process,

my focus shifted from working on a problem to interacting with the

larger forces of life and death. For me, this openness came only after I tried everything I could do consciously and truly didn't know how to go further. Once I was able to open to the possibility of death, W was ready to face it too. Looking back, I have a sense that W needed to wait for me to be truly open before we could get to the core behind her desire to die. My shift of assemblage point as the therapist was crucial in our work.

Love and providing a therapeutic container that accepted W's possible death was a crucial part of our work together. I really learned from W that the feelings I have as a therapist are even more important than what I do. Not until I worked with W had I been pushed to bring so much of myself into therapeutic sessions. In the end, I had to lose my therapeutic persona. In the face of the agony she was in, the only possible response for me was a purely human, feeling one. Any therapeutic interventions devoid of an authentic feeling only contribute to the problem by creating the cold world W suffers from. Amy Mindell (1995) points out that besides becoming skilled in the practice of therapeutic techniques, we as therapists are on a spiritual path "of learning, struggling, and finally loosening ourselves from the grip of what we have learned in order to live in accordance with our basic feeling about life" (p. 50).

As I'm studying our work, W calls me unexpectedly. She wants to tell me about an experience which might be important for my dissertation: She had a strange urge to go to a certain place and

180

meet some unknown people. They needed and appreciated her help. At first I didn't realize the importance of what she was telling me. Then it dawned upon me that she shifted her assemblage point and followed her irrational body experiences. She was aware how stupendous this was.

# CHAPTER 9: CONCLUSION

*The most difficult part about a warrior's way is to realize that the world is a feeling. When one is not-doing, one is feeling the world, and one feels the world through its lines.*
*Don Juan*

In this conclusion, I will identify and discuss elements that seemed to have a great deal of significance in both cases. These elements are: extreme experiences; trances and altered states; the therapist's process; love and respect, and finally, death. I will discuss each of these elements in the following way: First, I will summarize how a particular element emerges from the case examples. Second, I will state its significance for shifting the assemblage point. Third, I will point out its interface with shamanism and innovative applications in the practice of psychotherapy. The chapter concludes with an outlook on the basic difficulties and means involved in shifting the assemblage point.

Before outlining specific dynamics and factors, it is important to note that what did or did not occur depended on the skills and metaskills available to the people involved. While I can outline some factors which contributed to a shift of assemblage point in these people in specific moments and situations, I can't make any generalizations from these situations.

This research has changed my focus as a person and as a therapist. While developing my skills, metaskills and knowledge of patterns

182

and dynamics, I am also paying more attention to what could be accessible to me or the client when things get tough. This dissertation does not offer an answer as much as it offers a question: What do we draw on when find ourselves in "impossible" situations? In terms of shamanism the question might be: Which ally might help us in this moment?

## Factors in Shifting the Assemblage Point
### Extreme Experiences

The urge to shift our assemblage point emerges when we are at our limits. For example, in both cases the client and the therapist reached moments of feeling stuck and not knowing how to deal with the situation. Being at our limits does not necessarily mean that we feel down and out, but it does seem to mean that we have a sense of wanting to change our experience and not being able to. The sense of reaching one's limit might emerge only after having tried many times to overcome or repress a difficulty or limitation.

For the purpose of this dissertation, I am defining extreme experience as the point when a person feels stuck with an intense, emotional, dramatic experience and absolutely cannot go further with it. For example, in the case with E, the client began with an extreme experience of feeling enmeshed in an unbearably painful relationship situation. The therapist also was involved in an extreme experience. In the beginning, she was unable to work because she experienced so much pressure and, after several

attempts to overcome it, reached the point of not being able to go on. In the case of W, the client experienced repeated moments of utter despair and hopelessness. The therapist, too, after a while, reached her limits in attempting to be helpful and to prevent W from considering committing suicide.

It is very difficult to be open to extreme experiences, because they are frightening and because they challenge us to change the way we see ourselves and life. If we are able to go to the limits of an extreme experience and to unfold our feelings and thoughts, shifts can happen. For example, although W had attempted suicide many times and thought about death often, it was very difficult for her to face death and to stay with the thoughts and feelings that emerged when she considered death. Only when she stayed with her thoughts and feelings about dying did a sense of control emerge. Subsequently, dying was no longer the issue.

We have seen that shamanism varies widely throughout the world, which makes it impossible to make a general statement about how all shamanic traditions approach extreme experiences. Certain shamanic traditions use specific extreme experiences for initiation and training about the spirit world. For example, the Northwest Coast Salish Indians, who live on the border between Canada and the United States, have developed a specific means of working with anomic depression through exposing people to intense physical, emotional, and psychic stress under the guidance of a spiritual

elder. In this case, extreme experiences are used to bring people to a point of ego-death and rebirth where they discover how the spirit comes through them, moves them and helps the whole tribe.

Another use of extreme experiences in the shamanic traditions comes from the Lakota people of the plains in the United States. Lakota shamans go on vision quests, where they spend four days and nights in the wilderness without food or water. During this extreme physical experience, they pray and pay attention to their inner experiences, such as visions, and to what happens in the environment. The vision quest helps the shaman to receive visions and guidance from the spirit for themselves and the entire tribe. Erdoes (1989) quotes Pete Catches, a Lakota man, who says:

> A man going to the hilltop for a hanblecheya [vision quest] gives his flesh and bones to the great spirit. And if he is accepted, he goes on living, but his soul, his ghost, his spirit is working apart from his body. He has been given a power. It is almost like dying, only you come back from this death. That's a hard thing to do. (p. 27)

Shamanism differs from psychotherapy in that shamanic traditions purposefully seek out extreme experiences. Shamanism might offer psychotherapy a new approach to extreme experiences as they occur in people's lives. If psychotherapy pays attention to shamanic methods, it might change in terms of researching how to relate to extreme experiences and how to use them for change instead of normalizing them. This would require the field of psychotherapy to move away from the paradigm of adaptation and coping and to consider a transpersonal paradigm which values people's need to go

beyond the limits of who they think they are. It would require that the battle between individual or social norms and unknown or disavowed possibilities is valued.

## Trances and Altered States

Trances and altered states impose on our normal selves and identities. Trances can be a reaction to extreme experiences. We might feel "tranced out" by something, or we might feel "spaced out" into an altered sense of reality. It can be helpful to ask the following two questions about trance experiences: When and under what circumstances did the trance occur? What is your experience of the trance and where would it take you? Strong feedback to either of the questions might elicit a possible direction, be it exploring the original incident or the sensations and experiences of the trance. If it is not indicated to focus on the original experience, a trance may indicate the need to access another viewpoint from which to assess the original problem, i.e., a need to shift the assemblage point.

Trances came up in various ways in both case examples. In the beginning of the case with E, both the therapist and client displayed long pauses in their interaction, accompanied by signals of looking down or looking into each other's eyes for extended periods of time. These internal experiences and trances remained mysterious and disturbed the flow of interaction. The supervisor, Joe, helped the therapist to unfold her internal experience by

focusing on exactly how she perceived her inner world, which was through body sensations.

In the case of W, in the second session, the therapist was in a trance ("tranced out") and hypnotized by the issues at hand. She was trying to introduce an alternative to W's consideration of suicide. Under the influence of W's suffering and the therapist's own professional pressures, she was not able to access a detached vantage point from which to help W process the experience she was going through. As in the other case, outside assistance with unfolding the therapist's trance state allowed a radically different perspective to emerge. In supervision, the therapist sensed that simply working on the problem would not be sufficient and that, for her, the only thing left to do was pray. Prayer was an attempt to relate to larger forces; it introduced a more detached perspective that was concerned with helping W deal with all the aspects of her process, including the fact that she might or might not want to live.

In both case examples, going deeper into the experience of being in a trance brought forth a different vantage point and provided an innovative and vital dimension to the work. Unfolding trance-like or internal states provided a unique access to shifting the assemblage point. This is important for both therapist and client. In the cases of both W and E, it was important for the client that the therapist unfolded her trance and her experience of being

187

tranced out by a particular issue, be it an insurmountable issue in a client's personal relationship life or the threat of suicide.

Working with trance is difficult because the person in a trance has little access to an outside observer, or metacommunicator, who can discover what might be useful about this state. When the therapist feels in a trance, consulting a friend, therapist or supervisor is important. In both these cases, outside supervision helped the therapist discover more about her trance states. Consulting external helpers or internal wisdom and allies can guide us to regain or develop a metacommunicator which can stay present regardless of the experience we are having; helpers can be necessary to develop in this area.

Many shamanic traditions utilize trance and altered states in order to contact the spirit world. Trance is induced by various means, including drugs, dancing, drumming, singing and vision quests. Shamanic training cultivates the ability to quickly access altered states and an altered perception of the world. On this journey a proper attitude is critical. For example, Archie Fire Lame Deer (1992) tells the story of a man who was about to go on a vision quest and boasted that he would receive the greatest vision. During the vision question he ignored the strange voice coming from within a big boulder which told him to stop his loud way of chanting and lamenting. Suddenly the boulder seemed to roll down the hill with full force and the man took off, barely escaping with his life.

When the medicine men examined the site, the boulder rested in its accustomed place, and they told the man to be humble, to step lightly, and to respect nature (pp. 193-194). Only then might a vision, a message from the spirit, come to him.

Shamanism offers psychotherapy a model which values the experiences emerging from altered states and trance, experiences which are usually disregarded by the individual and society. Psychotherapy might learn to look at the value in people's need to change states of mind. It might research ways to help people access, without drugs or detrimental behaviors, what they are looking for in altered states and trances. For example in the case with W, it might look at the therapist's wish for W to live not only as a therapist's codependency but also as a trance. This trance, when unfolded, brings out the therapist's need to consult the larger forces, which in turn has an effect on the client. Unfolding trances and altered states can bring out and challenge the deepest beliefs in people.

Interface Between Therapist and Client

Our ability to shift the assemblage point varies depending on the environment we are in and the people we are with. This is no less so in the context of therapy. If a therapist is not open to certain aspects of the client's process it will be difficult to explore them and to see the whole process. Also, a therapist might need to be open to taking various roles in order to support the client's

process. For example, she might need to be a therapist, friend, advisor, or to model relating to experiences which are far away for the client.

In both cases, the therapist opened up to her irrational sensations and the insights and impulses that emerged from exploring them. She then used her own experiences to further the process. In the case of E, the therapist followed her body sensations and accessed the freedom of not having to identify with the body. This inspired E to tell her dream from the previous night. The client, unbeknownst to the therapist, had dreamed that both she and the therapist had out-of-body experiences. The therapist's immediate physical experiences and the client's dream proposed a similar direction in the work and a new dimension to E's struggle. In the session, through bodywork with the out-of-body experience, E actually experienced her dream of being a free spirit.

In this example, the process between the therapist and client did not allow the therapist to focus on the client. Several attempts to focus on the client failed; the only method that worked was for the therapist to go deeply into her own experiences. The therapist treated her own experiences not only as aspects of her personal psychology, but as signals to unfold in the context of the client's process. A shift happened when the therapist could begin to focus on her own seemingly irrational experiences and sensations. The therapist's focus on her own irrational experiences helped the

client feel more free to focus on her own. This leaves us with an open question: whose experiences are we having?

In the case of W, the therapist had to work on herself to open up to the forces of life and death whose power was greater than her human intention. Despite all her efforts, she had to accept that W might commit suicide. This reverence changed the focus and feeling of therapy; it created an openness to the client's contemplation of living or dying. This reverence for natural forces, including body sensations, led the way in the first session with W in a less spectacular but no less important way. In this session the therapist followed her own body impulse to hold the client and to soothe her pain, which turned out to be vital for the client.

In this case example, when the therapist was able to open up to the realization that ultimately forces beyond human control were at work, the client began to be able to explore her relationship with these forces and got in touch with a sense of personal power. In this case, the therapist took on the role of relating not only to W's personal situation but also to transpersonal forces.

The therapist's assemblage point has an influence on the client's assemblage point, since the therapist's assemblage point is significant in determining how far the interaction with a client can go. If the therapist is uncomfortable with certain experiences, it is unlikely that the client will be able to develop in these

areas with that therapist. On the other hand, a therapist who is open to experiences that are difficult for the client may model an innovative pattern of relating to these experiences. The therapist's ability to open up has an influence on the client's ability to open up and vice versa. These are significant insights for the practice of therapy, because they put an increased importance on the inner growth and development of the therapist.

Shamanism varies from tribe to tribe and person to person. Thus, there is no single way in which a shaman works with people. The parallel in shamanism which we might think of is that some shamans often take the role of accessing lost souls and helpful forces. For example, Kalahari Kung healers (Katz 1982) enter states of heightened awareness and intense energy, sometimes during all night long community healing dances. In this state, a healer is able to see invisible elements and spirits, to pull out and remove sickness from people dependably, and to interact with and possibly influence the spirits.

Shamanism's view of the relationship between healer and patient, or client and therapist, brings a special perspective to psychotherapy. The concept of the spiritual connection between people stretches the traditional therapeutic boundaries between what the client needs to, or can, work on, and what the therapist needs to, or can, work on. In a sense, shamanism introduces the model that the therapist and client work together on the issue at

hand, rather than the psychotherapeutic model that the therapist works on the client.

## Love and Respect

Love and respect are especially important feeling attitudes in that they honor nature, i.e., what is actually happening with both therapist and client. Love and respect provide an openness to all experiences, including those that might seem unpleasant or unacceptable to the client or the therapist. An attitude of love for nature or for greater forces creates a special container for the therapeutic relationship.

Love and respect for people and nature was vital in both cases. In the case with E, Joe conveyed this wisdom in the way he helped the therapist unfold a seemingly unacceptable experience. In the case with W, love and respect created a strong vessel for addressing difficult experiences. For example, W felt free enough to talk about her suicidal thoughts. The therapist and client together were able to negotiate the need to relate these suicidal thoughts to authorities who had previously hospitalized W in a traumatic way. Also, W mentions that the kindness with which the therapist related to her increased the kindness with which she related to herself.

Respecting nature is a basic tenet of shamanism. Widely ranging practices all over the world attempt to honor nature and to relate to nature spirits. Diverse rituals invoke communication with

natural forces and acknowledge that the shaman is not working alone but with the spirit. For Fool's Crow, a Lakota spiritual leader, the love and faith between shaman and patient, which comes from having been united in the great spirit, is the most important element of healing. The shaman channels and models this connection between the patient and the great spirit, and without it, no healing can occur (Mails 1991).

Shamanism's relationship to nature and the spirit advances a perspective which can be significant to the practice of psychotherapy. From a shamanic perspective, what happens in therapy is contingent on nature and the spirit. The depth of one's relationship to the nature of what is happening and the validation of impulses and visions determines how far the work can go, not only in terms of a particular issues, but also in terms of a person's relationship to life.

## Death

One of the potent methods of shifting the assemblage point and opening up to irrational experiences comes through confrontation with the experience of death. It is significant that the metaphor and felt presence of death is prevalent in both cases. There are various ways in which the idea of death can assist an individual in shifting the assemblage point. Death ends life as we know it consciously. Thus, it points out the impermanence of all that we know and experience in life. We see this idea of death as an

advisor in Castaneda (1972), who talks about how don Juan shows him that death can teach him how to be alert, aware and detached from his limited ideas about life and reality.

Death assists shifts in several ways. Individuals who fear, face or yearn for death are confronted with the challenge of changing the course of what they are doing. The fear of death can have to do with developing awareness, because this constant awareness of death can serve as a wake-up call about the nature of life. For example, I was scared that W might commit suicide and needed to wake up to the fact that I alone could not prevent her from committing suicide. Instead of trying to heal her, I became more interested in helping her complete her experiences.

Facing or confronting death generally creates a dramatic change in a person's identity. This process is most likely to occur at the point where a person has really hit the bottom and has no place to turn. For example, in the third session, W and I approached the possibility of death, which provided an opportunity for W to replace her wish to die with her wish to take control.

Yearning for death is yet another way to change. Hoping for death usually has to do with letting go of one's ordinary identity. This sort of change process often has to do with learning to have no edges, learning to live as a dead person who is not constrained by personal and cultural expectations. For example, in the first

session, W mentions suicide as the only possible way out of her misery. While I was humming a comforting melody and putting my arm around her shoulders, she found some temporary relief and was no longer preoccupied with wanting to kill herself.

In shamanic traditions encounters with death happen in different ways (Kalweit 1988). For example, Archie Fire Lame Deer (1992) describes that during a vision quest in the wilderness "you have to give yourself up completely. It almost like dying, only you come back" (p. 190). Medicine Grizzlybear Lake (1991) tells that his calling to become a Native healer manifested in the form of several out of body experiences, in connection with a strong fever, a near drowning experience and a car accident. During his out of body experiences powerful visions visited him. The calling and training to become a healer involves learning to cultivate one's relationship with the spirit world.

## Means to a New Psychotherapeutic Approach

If psychotherapy were to consider the basic attitudes behind shamanism as valid, the therapist's openness towards extraordinary experiences would need to change. Psychotherapy would need to support a sense of and a benevolence towards the crazy wisdom emerging from unfolding extreme experiences, altered states, irrational sensations and interactional experiences. The five factors which I have outlined can be boiled down to the need to validate unknown and irrational experiences as a way to grow.

Exploring experiences that seem to exist outside of consensus reality provides a key to shifting one's assemblage point. This involves noticing and unfolding unusual body experiences, irrational images, disturbing feelings, and spontaneous movements. Mindell (1993) has developed practical methods to access and live aspects of ourselves which usually stay buried within us. For example, in the first case, through working on my physical experience of feeling pressured to be a good therapist, I was able to shift my assemblage point and to discover that hidden behind or within the pressure is a sense of feeling free and fluid as a therapist.

These examples illustrate how the body naturally offers opportunities to explore worlds other than consensus reality. Following these opportunities is usually quite difficult, because the consensus trance steers us away from focusing on and validating strange body sensations, irrational imaginations and internal voices. Rather, we are encouraged to perceive everything from a rational and materialistic view which limits us when it comes to perceiving the strange messages hidden in natural phenomena such as the whispering wind, the shapes of clouds, or the twitches in the body.

Traditionally, therapists have viewed disturbances as residue from past trauma or as faulty behaviors. Another way to look at these experiences is as potential allies (Mindell 1993). In shamanism,

allies are helpful experiences, which are often experienced and conceptualized as spirits. They may appear in visions of natural places or animals, or as proprioceptive experiences. For example, in the case of W, the originally disturbing experience of anger became an ally upon unfolding the body sensation and movement associated with it. As a result, W discovered the transformative feeling of being an immovable rock.

The first challenge in exploring potential shifts in assemblage point is to notice the non-ordinary experiences. After noticing comes an additional challenge to recognize that these experiences are real. The temptation to brush them off as mere figments of the imagination is huge. Jung (1960), speaking from his own experience, said that fantasy was a real psychic process which needed to be taken as such. If one does not take psychic experiences as genuine, then one remains unconvinced that the unconscious can offer insight. When one is learning to take messages from the unconscious seriously, even the smallest openness to the unknown is revolutionary and constitutes an actual shift of assemblage point. Jung said:

> We must emphasize that the smallest alteration in the psychic factor, if it be an alteration of principle, is of utmost significance as regards our knowledge of the world and the picture we make of it. The integration of unconscious contents into consciousness, which is the main endeavor of analytical psychology, is just such an alteration of principle, in that it does away with the sovereignty of the subjective ego-consciousness and confronts it with unconscious collective contents. (p. 217)

Jung believed that learning to take psychic experiences as real is a long term process. During the first part of therapy, the therapist is the one who takes unconscious contents as vital and real. From Jung's point of view, in order to truly individuate, the client will at one point have to take over this function. In the case of W, she was able to unfold and transform the physical experiences of anger within the context of therapy.

No matter how much people want to change, a certain level of shifting seems to be in the hands of the spirit, or nature. We may want consciously to shift, but this desire is often not sufficient to achieve movement. In fact, being stuck may have certain benefits. We are forced to grow and stretch and learn in ways that are not of our choosing. This belief in a spirit or nature is a Taoistic view of life, a view which leaves the final decisions up to mysterious forces which are not comprehensible to the ordinary human mind.

# BIBLIOGRAPHY

## Shamanism

Ackerknecht, E.H. (1942 in 1971). "Culture and medicine of the Cheyennes, Dobuans and Thonga." In E. Ackerknecht, Medicine and Ethnology. Bern: Huber.

------ (1958 in 1971). "Primitive medicine's social function." In E. Ackerknecht, Medicine and Ethnology. Bern: Huber.

Achterberg, J. (1985). Imagery in healing. Boston: Shambhala.

Akwesasne Notes (1987). Basic call to consciousness. Mohawk Nation.

Allen, P.G. (1986). The sacred hoop: Recovering the feminine in American Indian traditions. Boston: Beacon Press.

Arden, H. (1994). Dreamkeepers: A spirit-journey into Aboriginal Australia. New York: Harper Collins.

Bahr, D.M., Gregorio, J., Lopez, D.I., and Alvarez, A. (1974). Piman shamanism and staying sickness. Tuscon, AZ: University of Arizona Press.

Beck, V.P., Walters, A.L., and Francisco, N. (Eds.). (1990). The sacred: Ways of knowledge, sources of life. Tsaile, AZ: Navajo Community College Press.

Black Elk, W., and Lyon, W.S. (1990). Black Elk: The sacred ways of a Lakota. San Francisco: Harper San Francisco.

Bourguignon, E. (1976). Possession. San Francisco: Chandler & Sharp.

Boyd, D. (1974). Rolling Thunder. New York: Dell.

Bradzky, A.T., Danesewich, R., and Johnson, N. (Eds.). (1977). Stones, bones and skin: Ritual and shamanic art. Toronto,

Canada: Artscanda.

Castaneda, C. (1968). <u>The teachings of Don Juan: A Yaqui way of knowledge</u>. New York: Simon & Schuster.

------ (1971). <u>A separate reality</u>. New York: Simon & Schuster.

------ (1972 in 1991). <u>Journey to Ixtlan</u>. New York: Washington Square Press.

------ (1971). <u>Tales of power</u>. New York: Simon & Schuster.

------ (1987). <u>The power of silence: Further lessons of Don Juan.</u> New York: Simon and Schuster.

Clements, F.E. (1932). Primitive concepts of disease. <u>University of California Publications in American Archeology and Ethnology</u>, <u>32</u>(2), 185-252.

Crow Dog L. and Erdoes, R. (1995). <u>Crow Dog: Four generations of Sioux medicine men</u>. New York: Harper and Collins.

Crow Dog, M. and Erdoes, R. (1990). <u>Lakota woman</u>. New York: Grove Weidenfeld.

Dittrich, A. and Scharfetter, C. (1987). <u>Ethnopsychotherapie</u>. Stuttgart, Germany: Enke.

Doore, G. (1988). <u>Shaman's path</u>. Boston: Shambhala.

Eliade, M. (1951 in 1982). <u>Shamanism: Archaic technique of ecstasy</u>. London: Routledge and Kegan Paul.

Erdoes, R. (1989). <u>Crying for a dream.</u> Santa Fe, NM: Bear & Company Publishing.

Frake, C.O. (1961 in 1977) "The diagnosis of disease among the Subanun of Mindanao." In D. Landy (Ed)., <u>Culture, disease and healing</u>. New York: Macmillan.

Good, B.J. (1977). "The heart of what's the matter: The semantics of illness in Iran." Culture, medicine and psychiatry, 1, 25-58.

Grossinger, R. (1990). Planet medicine. Berkeley: North Atlantic Books.

Halifax, J. (1979). Shamanic voices: A survey of visionary narratives. New York: Arkana.

------ (1982). Shaman: The wounded healer. London: Thames and Hudson.

Harner, M. (1980). The way of the shaman: A guide to power and healing. New York: Harper and Row.

Heinze R.I. (Ed.). (1987). Proceedings of the third international conference on the study of shamanism and alternate modes of healing. Madison, WI: A-R Editions, Inc.

------ (1992). Shamans of the 20th century. New York: Irvington.

Helman, C.G. (1978) "'Feed a cold, starve a fever' - folk models of infection in an English suburban community and their relation to medical treatment." Culture, medicine and psychiatry, 2, 107-37.

Hilbert, V. (Ed.). (1985). Haboo: Native American stories from Puget Sound. Seattle: University of Washington Press.

Hoppal, M. (1987). "Shamanism: An archaic and/or recent belief system." In S. Nicholson, Shamanism: An expanded view of reality. Wheaton, IL: The Theosophical Publishing House.

Houston, J. (1987). "The mind and soul of the shaman." In S. Nicholson (Ed.), Shamanism. Wheaton, Il: Quest Books.

Jaimes, M.A. (Ed.). (1992). The state of Native America: Genocide, colonization, and resistance. Boston, MA: South End Press.

Jilek, W.G. (1974). Salish Indian mental health and culture change: psychohygienic and therapeutic aspects of the guardian spirit ceremonial. Toronto: Holt, Rinehart and Winston of Canada.

Kalweit, H. (1988). Dreamtime and inner space. Boston: Shambhala.

Katz, R. (1982). Boiling Energy: Community healing among the Kalahari Kung. Cambridge, MA: Harvard University Press.

Katz, R. (1993). The Straight Path: A story of healing and transformation in Fiji. New York: Addison-Wesley Publishing Company.

Kiev, A. (1974). Magic, faith and healing. New York: Free Press.

King, S. (1988). Seeing is believing: The four world of the Shaman. In Doore, G. (Ed.). (1988) Shaman's path: Healing, personal growth and empowerment. Boston: Shambhala.

Kremer, J.W. (1988). Shamanic tales as ways of personal empowerment. In Doore, G. (Ed.). (1988). Shaman's path: Healing, personal growth and empowerment. Boston: Shambhala.

Krippner, S., and Villoldo, A. (1976). The realms of healing. Millbrae, CA: Celestial Arts.

Krippner, S., and Welch, P. (1992). Spiritual Dimensions of Healing: From Native Shamanism to contemporary health care. New York: Irvington Publishers.

Lake, Medicine Grizzlybear (1991). Native healer. Wheaton, Ill.: Quest Books.

203

Lame Deer, Archie Fire, and Erdoes, R. (1992). <u>Gift of power: The life and teachings of a Lakota medicine man</u>. Santa Fe, NM: Bear&Company.

Lame Deer, John Fire, and Erdoes, R. (1972). <u>Lame Deer: Seeker of visions</u>. New York: Simon & Schuster.

Langdon, E.J.M., and Baer, G. (Eds.). (1992). <u>Portals of power: Shamanism in South America</u>. Albuquerque, NM: University of New Mexico Press.

Lazarus, E. (1991). <u>Black hills; white justice</u>. New York: Harper and Row.

Leslie, C.M. (1977) Pluralism and integration in the Indian and Chinese medical systems. In D. Landy (Ed.), <u>Culture, disease and healing</u>. New York: Macmillan.

Lewis, I.M. (1971). <u>Ecstatic religion: An anthropological study of spirit possession and shamanism</u>. Harmondsworth: Penguin.

Mails, T.E. (1991). <u>Fools Crow: Wisdom and power</u>. Tulsa: Council Oak Books.

Mindell A. (1993). <u>The shaman's body: A new shamanism for transforming health, relationships and community</u>. San Francisco: Harper.

Mohawk, J. (1992). "Looking for Columbus: Thought on the past, present, and future of humanity." In M.A. Jaimes (Ed.), <u>The state of Native America: Genocide, colonization, and resistance</u>. Boston: South End Press.

Nabokov, P. (Ed.). (1992). <u>Native American Testimony: A chronical of Indian-White relations from prophecy to the present</u>. New

York: Penguin.

Neihardt, J.G. (1932 in 1988). <u>Black Elk speaks</u>. Lincoln: Bison
     Book/University of Nebraska Press.

Nicholson, S. (Ed.). (1987). <u>Shamanism</u>. Wheaton, Ill.: Quest
     Books.

Perkins, J. (1994). <u>The world is as you dream it: Shamanic
     teachings from the Amazon and the Andes</u>. Rochester, VT:
     Destiny Books.

Peters, L.G., and Price-Williams, D. (1980). "Towards an
     experiential analysis of shamanism." <u>American Ethnologist</u>, <u>7</u>,
     397-418.

Pfleiderer B., and Bichmann, W. (1985). <u>Krankheit und Kultur.</u>
     Berlin, Germany: Dietrich Reimer Verlag.

Rasmussen, K. (1927). <u>Across Arctic America, narratives of the
     fifth Thule expedition</u>. New York: Putnam.

Rivers, W.H.R. (1924). <u>Medicine, magic and religion.</u> London: Kegan
     Paul.

Rogers, S.L. (1982). <u>The shaman: his symbols and his healing
     powers</u>. Springfield, Ill.: Charles C. Thomas.

Rose W. (1992). "The great pretenders: Further reflection on
     whiteshamanism." In M.A. Jaimes (Ed.), <u>The state of Native
     America: Genocide, colonization, and resistance</u>. Boston:
     South End Press.

Siskind, J. (1975). <u>To hunt in the morning</u>. New York: Oxford
     University Press.

Smith, A. (1994). "For all those who were Indian in a former life."

Cultural Survival Quarterly, 17(4), 70-71.

Some, Malidoma (1993). "Remembering our purpose." In context, 34,
30-32.

------ (1993). Ritual: Power, healing and community. Portland, OR:
Swan Raven.

------ (1994). Of Water and spirit: Ritual, magic, and initiation
in the life of an African shaman. New York: Tarcher/Putnam.

Stands in Timber, J. (1972). Cheyenne memories. Lincoln, NE:
University of Nebraska Press.

Suzuki, D. and Peter Knudtson. (1992). Wisdom of the Elders. New
York: Bantam Books.

Tax, Sol (1952). "Action anthropology." America Indigena, 12, 103-
109.

Townsend, J.B. (1988). "Neo-Shamanism and the modern mystical
movement." In Doore, G. (Ed.). (1988) Shaman's path: Healing,
personal growth and empowerment. Boston: Shambhala.

Tucker, M. (1992). Dreaming with open eyes: the shamanic spirit in
twentieth century art and culture. San Francisco:
Aquarian/Harper.

Turner, V. (1969 in 1987). The ritual process: Structure and anti-
structure. Ithaca, NY: Cornell University Press.

Villoldo, A., and Krippner, S. (1986). Healing States: A journey
into the world of spiritual healing and shamanism. New York:
Simon & Schuster.

Walsh, R.N. (1990). The spirit of shamanism. Los Angeles: Tarcher.

Wall S. (1994). Wisdom's daughters: Conversations with women elders

of Native America. New York: Harper Perennial.

Wall, S. and Arden, H. (1990). Wisdomkeepers: Meetings with Native American spiritual elders. Hillsboro, OR: Beyond Words.

Wallace, Black Elk and Lyon, W.S. (1990). Black Elk. San Francisco: Harper.

Weatherford, J. (1988). Indian givers: How the Indians of the Americas transformed the world. New York: Fawcett Columbine.

Wolf, F.A. (1991). The eagle's quest: A physicist's search for truth in the heart of the shamanic world. New York: Summit Books.

## Eastern Traditions, Studies of the Mind, and Psychotherapy

Anderson, J.R. (1985). Cognitive Psychology and its implications. New York: W.H. Freeman and Company.

Assagioli, R. (1965 in 1986). Psychosynthesis. New York: Penguin Books.

Bandler, R., and Grinder, J. (1982). Reframing: neuro-linguistic programming and the transformation of meaning. Moab, UT: Real People Press.

Barbour, I.G. (1966). Issues in Science and Religion. New York: Harper & Row.

Barrett, W. (Ed.). (1956). Zen Buddhism: Selected writings of D.T. Suzuki. Garden City, NY: Doubleday Anchor Books.

Beattie, M. (1987). Codependent no more. New York: Harper Collins.

Berman, M. (1981). The reenchantment of the world. New York; Bantam.

Blofeld, J. (1979). <u>Taoism, the quest for immortality</u>. London: Allen & Unwin.

Chen, E.M. (1989). <u>The Tao Te Ching: A new translation with commentary</u>. New York: Paragon House.

Corey, G., Schneider Corey, M., and Callanan, P. (1979). <u>Issues and ethics in the helping professions</u>. Monterey, CA: Brooks/Cole Publishing Company.

Corsini, R.J. (Ed.). (1984). <u>Current psychotherapies</u>. Itasca, IL: F.E. Peacock Publishers, Inc.

Costa, L., and Altekruse, M. (1994). Duty-to-warn guidelines for mental health counselors. <u>Journal of counseling & development</u>, <u>72</u>(4), 346-350.

Diamond, J. (1996). <u>Status and power in verbal interaction: Disclosure in a close knit social network</u>. Philadelphia: John Benjamin.

Dilgo Khyentse (1988). <u>The wish-fulfilling jewel: The practice of guru yoga according to the longchen nyingthig tradition</u>. Boston: Shambhala.

Devos, G.H., Francis, L.K., Marsella, A,J. (1985). <u>Culture and self: Asian and Western perspectives</u>. New York: Tavistock.

Doore, G. (Ed.). (1990). <u>What survives? contemporary explorations of life after death</u>. Los Angeles: Tarcher.

Dossey, L. (1989). <u>Recovering the soul. A scientific and spiritual search</u>. New York: Bantam.

Erickson, M.H., and Rossi, E. (1981). <u>Experiencing hypnosis: Therapeutic approaches to altered states</u>. New York: Irvington.

Evans-Wentz, W.Y. (1960). <u>The Tibetan Book of the Dead</u>. New York: Oxford University Press.

Feng, Gia-Fu, and English, J. (Trans. of Lao Tse). (1972). <u>Tao Te Ching: A new translation</u>. New York: Vintage.

Fremantle, F. and Trungpa Choegyam (1987). <u>The Tibetan book of the dead.</u> Boston: Shambhala.

Freud, S. (1920 in 1989). <u>The complete introductory lectures on psychoanalysis</u>. New York: W.W. Norton.

Gendlin, E.T. (1981). <u>Focusing</u>. New York: Bantam Books.

Goldstein, J. and Kornfield, J. (1987). <u>Seeking the heart of wisdom: The path of insight meditation</u>. Boston: Shambhala.

Goodbread, J.H. (1987). <u>The dreambody toolkit</u>. New York: Routledge & Kegan Paul.

------ (1985). <u>Dreaming up reality: The politics of countertransference in psychotherapy and everyday life</u>. Unpublished manuscript.

Grof, S. (1987). <u>Das Abenteuer der Selbstentdeckung</u>. Muenchen, Germany: Koesel.

------ (1993). <u>The holotropic mind: The three levels of human consciousness and how they shape our lives</u>. San Francisco: Harper San Francisco.

Hanh, Thich Nath. (1988). <u>Being peace</u>. Berkeley: Parallax Press.

Harman, W. (1988). <u>Global mind change</u>. New York: Warner.

Heizer, L. (1992). <u>Beyond compare: A personal reflection on treatment approaches with emotionally disturbed adolescents</u>. Doctoral dissertation. Cincinnati, OH. The Union Institute.

209

Hendin, H. (1982). Suicide in America. New York: W.W. Norton & Company.

Hillman, J. (1964). Suicide and the soul. Dallas, TX: Spring Publications.

Hoffman, L. (1981). Foundations of family therapy. New York: Basic Books.

Hooks, B. (1990). Yearning: Race, gender, and cultural politics. Boston: South End Press.

Howe Colt, G. (1991). The enigma of suicide. New York: Summit Books.

James W. (1902 in 1961). The varieties of religious experience. New York: Collier.

Jung, C.G. (1959 in 1977). The archetypes and the collective unconscious. Princeton: Princeton University Press.

------ (1960 in 1978). The structure and dynamics of the psyche. Princeton: Princeton University Press.

------ (1963 in 1974). Mysterium coniunctionis: An inquiry into the seperation and synthesis of psychic opposites in alchemy. Princeton: Princeton University Press.

------ (1965). Memories, dreams and reflections. New York: Vintage Books.

Kapleau, R.P. (1980). The Three Pillars of Zen: Teaching, practice and enlightenment. New York: Anchor Books-Doubleday.

Kaptchuk, T.J. (1983). The web that has no weaver: Understanding Chinese medicine. New York: Congdon & Weed.

Kochman, T. (1983). Black and white styles in conflict. Chicago:

The University of Chicago Press.

Kornfield, J. (1993). <u>A path with a heart: A guide through the perils and promises of a spiritual life</u>. New York: Bantam Books.

Lakoff, G. and Johnson, M. (1980). <u>Metaphors we live by</u>. Chicago: University of Chicago Press.

Langone, J. (1986). <u>Dead end: A book about suicide</u>. Boston: Little, Brown and Company.

Levin, S. (1989). <u>Who dies?</u> New York: Doubleday.

Maris, R.W. (1981). <u>Pathways to suicide: A survey of self-destructive behaviors</u>. Baltimore: The Johns Hopkins University Press.

Maslow, A.H. (1968). <u>Toward a psychology of being</u>. New York: D. Van Nostrand Company.

Merleau-Ponty, M. (1979). <u>Phenomenology of perception</u>. London: Routledge and Kegan Paul.

Mindell, Amy. (1995). <u>Metaskills: The spiritual art of therapy</u>. Tempe, AZ: New Falcon Press.

Mindell, Arnold and Amy (1992). <u>Riding the horse backwards</u>. New York: Penguin Arkana.

Mindell, Arnold. (1975). <u>The death walk</u>. Unpublished manuscript.

------ (1985). <u>River's way</u>. New York: Penguin Arkana.

------ (1986a). <u>Dreambody: The body's role in revealing the self</u>. Boston: Sigo Press.

------ (1986b). <u>Working with the dreaming body</u>. New York: Penguin Arkana.

------ (1987). <u>The dreambody in relationships</u>. New York: Penguin
   Arkana.

------ (1988). <u>City shadows</u>. London: Routledge & Kegan Paul.

------ (1989a). <u>Coma: Door to awakening</u>. London: Penguin Arkana.

------ (1989b). <u>The year one: Global process work with planetary
   myths and structures</u>. New York: Penguin Arkana.

------ (1989c). <u>Working on yourself alone</u>. New York: Penguin
   Arkana.

------ (1992a). <u>The leader as a martial artist</u>. San Francisco:
   Harper.

------ (1992b). Arny Mindell interviewed by Fukuda-San. <u>The journal
   of process oriented psychology</u>, <u>4</u>(1).

------ (1993). <u>The shaman's body: A new shamanism for transforming
   health, relationships and community</u>. San Francisco: Harper.

------ (1993a)." At the heart of the Lava Rock Clinic:
   Conversations with Max Schuepbach and Arny Mindell," by S.
   Schwarz. <u>The Journal of Process Oriented Psychology</u>, <u>5</u>(2), 15-
   22.

------ (1995). <u>Sitting in the Fire: Large group transformation
   using conflict and diversity</u>. Portland, OR: Lao Tse Press.

Muktananda, S. (1978). <u>Play of consciousness</u>. SYAD Foundation.

Neihardt, J.G. (1979). <u>Black Elk speaks: Being the life story of a
   holy man of the Oglala Sioux</u>. Lincoln: University of Nebraska
   Press.

Peck, M.S. (1980). <u>The road less travelled</u>. New York: Simon and
   Schuster.

Pelletier, K.R. (1978). <u>Towards a science of consciousness</u>. New York: Delacorte Press.

Pelletier, K.R., and Garfield, C. (1976). <u>Consciousness: East and West</u>. New York: Harper Colophon Books.

Perls, F. (1973). <u>The gestalt approach and eye-witness to therapy</u>. USA: Science and Behavior Books, Inc.

Podvoll, E. (1983). Uncovering a patient's history of sanity. In J. Welwood, <u>Awakening the heart</u>. Boston: Shambhala.

------ (1990). <u>The seduction of madness: revolutionary insights into the world of psychosis and a compassionate approach to recovery at home</u>. New York: Harper Collins.

Popper, K.R., and Eccles, J.C. (1977). <u>The self and its brain: An argument for interactionism</u>. Boston: Routledge & Kegan Paul.

Pribram, K.H. (1986). "The cognitive revolution and mind/brain issues." <u>American Psychologist</u>, <u>41</u>, 507-520.

Rogers, C.R. (1951). <u>Client-centered therapy</u>. Boston: Houghton Mifflin.

Rose, S. (1976). <u>The conscious brain</u>. New York: Vintage Books/Random House.

Schein, E.H. (1988). <u>Organizational psychology</u>. Englewood Cliffs, NJ: Prentice-Hall.

------ (1993)." Legitimating clinical research in the study of organizational culture." <u>Journal of Counselling and Development</u>, <u>71</u>(6), 703-708.

Sheldrake, R. (1991). "The present of the past: Morphic resonance and the habits of nature." In B. McNeill and C. Guidon

(Eds.), <u>Noetic sciences collection</u>. Sausalito, CA: Institute of Noetic Sciences.

Sogyal Rinpoche (1992). <u>The Tibetan book of living and dying</u>. San Francisco: Harper.

Stevens, J. (1987). <u>Abundant peace: The biography of Morihei Ueshiba, the founder of Aikido</u>. Boston: Shambhala.

Summers, G. (1994). <u>Conflict: A gateway to community; Process oriented conflict resolution: An interview with founder Arnold Mindell</u>. Doctoral dissertation. Cincinnati, OH. The Union Institute.

Suzuki, D.T. (1955). <u>Studies in Zen</u>. New York: Dell.

Suzuki, D.T. (1987). <u>The awakening of Zen</u>. Boston: Shambhala.

Suzuki, S. (1976). <u>Zen mind, beginner's mind</u>. New York: Weatherhill.

Tansley, D.T. (1977). <u>Subtle body</u>. London: Thames and Hudson.

Tarnas, R. (1991). <u>The passion of the western mind: Understanding ideas that have shaped our world view</u>. New York: Ballantine Books.

Trungpa, T. (1984). <u>Shambhala: The sacred path of the warrior</u>. Boston: Shambhala.

Tart, C.T. (1989). <u>Open mind, discriminating mind</u>. New York: Harper & Row.

------ (1975). <u>States of consciousness</u>. New York: Dutton.

Ueshiba, K. (1984). <u>The spirit of Aikido</u>. New York: Kodansha International.

Underwood, G. (1974). Moray vs. the rest: The effect of extended

shadowing practice. <u>Quarterly Journal of Experimental Psychology</u>, <u>26</u>, 368-372.

Walsh, R.N. and Vaughan, F. (1980). <u>Beyond Ego: Transpersonal dimensions of psychotherapy</u>. Los Angeles: Tarcher.

Walsh, R.N., and Vaughan, F. (1993). <u>Paths Beyond Ego: The transpersonal vision</u>. Los Angeles: Jeremy P. Tarcher/ Perigee.

Watzlawick, P. (1967). <u>Pragmatics of human communication</u>. New York: Norton.

Watzlawick, P., Weakland, J., and Fisch, R. (1974). <u>Change: Principles of problem formation and problem resolution</u>. New York: W.W. Norton & Company.

<u>Webster's Dictionary</u>. (1988). New York: Lexicon.

Welwood, J. (1983). <u>Awakening the heart: East/West approaches to psychotherapy and the healing relationship</u>. Boston: Shambhala.

Wilber, K., Engler, J. and Brown, D. (1986). <u>Transformation of Consciousness</u>. Boston; Shambhala.

Zwig, A. (1992). <u>An exploratory study of a process paradigm as applied to biomedicine: An interactive inquiry</u>. Doctoral dissertation. San Francisco. Saybrook.