

*“FIRST CONTACTS:
Crises & Spiritual
Emergencies”*

*A Handbook about and for
People Experiencing Various Sorts
of
Psychological, Emotional
& Spiritual Crisis,
Spiritual Emergence Processes,
Spiritual Emergencies,
and
also for their Carers.*

By

Courtenay Young

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INTRODUCTION

Our Western society does not fully acknowledge the process of spiritual maturation, to the extent that there is hardly even a proper language for much of this material, and to the extent that people who have experienced problems with this maturational process are often seen as unstable or insane, and are thus discriminated against, or even condemned. The actual process of spiritual maturation or emergence has itself long been marginalized in the West: it has also often been removed from any 'normal' realms by sanctification or beatification.

But, at least in the last 100 years or so, the process of emotional and psychological maturation has developed its own particular language, and many of the concepts from these processes have been relatively well accepted, if little understood, by society at large. Jung's concept of 'individuation', for example, is the concept whereby an 'individuated' person has worked through most of their childhood dependencies and neurotic attachments and has emerged as a reasonably functioning adult individual. However, in the arena of spiritual maturation, we are unfortunately still pretty much in the Dark Ages.

Many of the symptoms of a spiritual maturational process happen unnoticed: a gradual loss of interest in the religion of one's original family, followed by a growing interest, as an adult, in something that feels more meaningful. This may, or may not, be another established religion, or a belief system. For some, however, the changes are much more dramatic. The symptoms may be similar to a psychotic episode, or it may take a major crisis for us to understand that the old familiar ways of doing and being are becoming increasingly dysfunctional; or the person may suddenly make significant changes their whole lifestyle. This handbook is written for these people, and their families and friends.

More primitive societies more readily acknowledge that when a young man or woman has a "big dream" for the tribe, or falls into a coma and then awakens with wonderful tales of what has happened to them whilst asleep, or shows particular aptitudes for divination or healing, that these 'symptoms' are indications that their spiritual maturational process is starting (their spirit is emerging) and they are then given the appropriate training from the elders, shamans, priestesses, and so forth. If the societal structure has been destroyed, or the society is largely secular, and these symptoms are not seen as such, then they can be misinterpreted as aberrations.

In the 1970' & 80's, a Czech psychiatrist, Stanislav Grof, working with his wife Christina at Esalen, a community in Big Sur, California, coined the phrase "Spiritual Emergency" to describe these 'normal' spiritual emergence processes that seemed to be going wrong. This does not mean to say that there is something wrong with the person involved; often it is the society around them that has not been recognizing what is happening to that person. The signs and symptoms of these spiritual emergence processes are seen instead as pathologies. Imagine if we did not acknowledge the symptoms of puberty, so that facial hair and growing breasts were seen as aberrations and as medical cases requiring depilation or mastectomies. Something similar quite often happens to people in these situations of Spiritual Emergency. In James Hillman's *The Soul's Code*, he theorizes that we all have this innate potential.

This handbook was originally written, in a much shorter format, as a manual for the staff of the Findhorn Foundation, an international spiritual & educational community in Northeast Scotland. It has been re-written and developed over the last 17 years, based on much practical experience, rather than on abstract theory, and based on teaching this material many times to psychotherapists, trainees, workshop participants and community members. The material tries to be pragmatic, always.

Part One describes & defines what is meant by a crisis, any crisis, and gives some ideas as to what to do if or when someone you know or are working with goes into such a crisis. Much of this material is traditional mainstream and pragmatic. Because of the fear of these 'unknown' areas in the general collective; because of the discrimination against mental illness; because of our lack of understanding of the world of spirit; people generally do not know what to do with a person in crisis unless they have been specifically trained, as a clinician, or in the mental health field.

Part Two goes much deeper into the concept of Spiritual Emergence processes and some of their ramifications. I have separated the two aspects out this way as, if someone is in a crisis, spiritual or otherwise, then the pragmatic material in Part One is necessary, first and foremost. However many people will be more interested in starting to read the slightly more theoretical, or attractive, aspects contained in Part Two. However, they do hang together and complement each other.

It is very inspiring to work in this field in these different ways. It is also an incredible privilege and opportunity to be, in some ways, both selected as a channel for this material and has also discovered a way of making it more ordinary and 'normal'. I believe this material, and the whole process of Spiritual Emergence, is our normal human birthright, our spiritual heritage, and is not limited to any particular religion, sect, community, or to people who go into crisis. It should be part of normal and healthy development for everyone to open up to these realms, even though, in the moment, sometimes we have to have a bit of a crisis in order to drive out any old and redundant material that the world requires us to "know" in order to "do", and allow in the new, very personal, and unique material that allows us to "be" different and truly ourselves.

Some of this material forms the basis for training modules that I have given internationally, mainly to psychotherapy trainees, on Spiritual Emergencies and crisis work, and in seminars and workshops that I give at psychotherapy conferences. Some of it is very newly written material, and deals with basic spiritual principles, many of which are very old and fundamental truths. My wife, Laura Steckler, a Clinical Psychologist and Body-Oriented Psychotherapist, as well as a dancer & performance artist, and I together have developed some of this material into a residential workshop format for members of the public, which we call The Spirit of the Body. The Findhorn Foundation also works with some of this material, in this way of thinking, and with similar material in its own particular method of spiritual practice, as a fairly well-defined spiritual and educational path. I whole-heartedly support this method of 'normalization'. Anyone who wants to can come and do a programme, work alongside members of the

community, and see and feel how this material can be applied on a day-to-day basis.

Whether you are cleaning toilets, or trying to save the world, or working with someone in crisis, or in a crisis or emergency, the principles are still very relevant. But for some people, either it is important or necessary, or maybe it just happens, that they are on a different life path, or they jumped the “Spiritual Maturation 101” and found themselves in the wrong grade, and need a “crash course” to catch up; or maybe they are just in the wrong school., or they feel that they are even on the wrong planet. They are experiencing a crisis instead of the regular steady developmental programme of a gently unfolding spiritual emergence process. And they are in a different process; their world has changed – and the process of change can sometimes be dramatic and painful, as well as incredibly beautiful.

There are no particular rules of “how” to go through these processes; we just work with each individual situation as we find it. More and more, people are having these situations at home and in their own environments, without coming to Findhorn, or Esalen, or going to India, or taking drugs, and also without getting taken off to their local psychiatric ward. Thankfully, it is becoming much more “normal”, and this is the new way that we must, I think, all begin to look at all these processes.

Unfortunately, there are still tendencies to hang on to the feelings of ‘specialness’, the mystery, or to consider oneself as blessed, privileged or, in some way, superior by having access to this material, or to charge large amounts of money for a particular form of initiation. In the past, people have made a ‘mystery’ out of it and only ‘initiated’ certain people into these mysteries. This should not be the case any longer, even if it was appropriate or legitimate at some earlier time. We have to make this material, this ‘stuff’, much more normal and accessible. It is our spiritual ‘birthright’.

Our Western society also needs these particular energies in order for it to change; in order for it to mature; in order for it to redress the balance between “doing” or “having”, and “being”; the balance between hatred and acceptance; the balance between war and peace; the balance between hopes for sanity and acts of insanity.

We need to disseminate the essential spirituality embedded in these processes and to find these being reflected in our social lives, as we try to cope with these new spiritual technologies and a new world order, especially as a result of the processes of increasing globalization and the more recent events of September 11, 2001, the Gulf Wars, and the global warming and resultant desertification of the planet. This sort of esoteric material needs to become the “norm” rather than the exception. Archbishop Desmond Tutu says: *“The wonderful thing is that God has placed in each of us a hunger, a hunger for transcendence. A hunger for the thing your heart is restless for until you find it.”*

The increasing acceptance of ‘spiritual’ people into mainstream society like Carl Jung, Rudolf Steiner, the Dalai Lama, Mother Theresa and even Eileen Caddy, one of the founders of the Findhorn Foundation recently awarded the MBE for “services to spirit”, gives us all hope. There are many things wrong with the present, and with the New Age movement that seems to epitomize this search for

spirit, but it also reflects a growing need for material, which is relevant today, rather than a religion that became codified many hundreds of years ago.

These processes also have great power – the power to change, to awaken the inner spirit, the power to transcend, or the power to wreck people’s lives. This power can be awesome. But then so is electricity, and nowadays we think nothing of turning on a light switch, when to have this facility, this instant power, would have been considered a miracle to our cave-dwelling ancestors. Maybe it is all to do with how we perceive the light, or how we relate to that which casts those shadows that dance on the wall. Often these shadows are just problems within ourselves, and we are facing the wrong way: we are just not looking at “The Light”.

Please don’t make the mistake of thinking that this is all to do with someone else. Yes, they may be having a crisis, even a spiritual one, but it will almost inevitably affect you as well, and thus some of this material will become part of your process, your life, your transformation. Your reactions will reverberate with them and facilitate or hinder their process; and you will also affect others. The ripples spread once the stone has been dropped in the pond.

And how we use this material is also very important. We can view our glass as half-full, or half-empty. A crisis can be an opportunity, a side-track, or a disaster. There is the story about the Four Rabbinim .

One night, four rabbinim were visited by an angel who awakened them and carried them up to the Seventh Vault of the Seventh Heaven. There they beheld the sacred Wheel of Ezekiel.

Somewhere in the descent from Pardes, Paradise, to Earth, one Rabbi, having seen such splendor, lost his mind and wandered frothing and foaming until the end of his days. The second Rabbi was extremely cynical: “Oh I just dreamed Ezekiel’s Wheel, that was all. Nothing really happened.” The third Rabbi carried on and on about what he had seen, for he was totally obsessed. He lectured and would not stop with how it was all constructed and what it all meant ...and, in this way, he went astray and betrayed his faith. The fourth Rabbi, who was a poet, took a paper in hand and a reed and sat near the window writing song after song praising the evening dove, his daughter in her cradle, and all the stars in the sky. And he lived his life better than before.

So, in this new landscape, I can only wish you to “Journey Well !”

Courtenay Young
Findhorn & Edinburgh
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TYPES OF CRISIS

A crisis is defined as occurring: "... when a person faces an obstacle to important life goals that is, for a time, insurmountable through the utilization of (their) customary methods of problem solving. A period of disorganization ensues, a period of upset, during which many abortive attempts at solution are made."

Caplan: *An approach to community mental health*

Types of crisis include:

- Death of a parent, child or close family member; deep grief
- Sudden loss of: job, home, role, status, finance, marriage/relationship, integrity, self-image, world view
- Serious physical illness: operations, chronic conditions, disability
- Serious change in mental/emotional stability: depression, schizophrenia, bi-polar, character disorder, episodic psychosis, borderline cases, repressed memories
- Upset to expectations: prematurity, redundancy, burn-out
- A continuing series of stressful situations
- Maturation crisis: adolescence, menopause, retirement
- Accidents and disasters: people experiencing disasters now commonly receive counselling
- Physical abuse: rape, violence, mugging, recovered memories of,
- Substance abuse: drugs, alcohol, cigarettes, other substances
- Suicide attempts or self-harm
- Social upset: economic depression, war, riots
- Acts of God: fire, flood, earthquake, storm, famine, plague
- Family crisis: child abuse, death in family, divorce, breaking of co-dependencies
- A build-up of factors: moving house *and* new baby *and*
- Existential crisis – loss of sense of self; no *raison d'être*, or a spiritual emergency.

Remember: a "mild" crisis is probably essential to any form of major emotional, psychological or spiritual developmental change. It can help us lift ourselves up out of the rut we've gotten ourselves into and inspire us to grow.

The most helpful thing that can have happened is for the crisis to have been identified as early as possible. This allows our "crisis strategies" to come into play and the effects of the crisis are thus less likely to be compounded; the appropriate support systems can be identified and mobilized. Normal support systems are then all ready to be activated.

All these things can happen to any of us: and many of them will happen, one way or another. Life is essentially difficult. Sometimes we will cope with one of these, or some of these, reasonably well, but then something will come, seemingly out of the blue, and throw us totally off base and wham: our world has changed. Nothing will ever be the same again. Do we act like Lot (in the Bible) and just bemoan our woes, or do we face the challenge, see where it will take us, and grow?

EMERGENCY SITUATIONS

There are certain things you, or anyone without very specialized training, *Cannot and Should Not and Must Not* try to cope with.

These are real EMERGENCY situations & include:

**OVERDOSE OF DRUGS or MEDICATION;
PHYSICAL VIOLENCE;
DESTRUCTION OF PROPERTY;
SELF-INFLICTED INJURIES, or SUICIDE ATTEMPTS;**

IMMEDIATELY have someone call the police, ambulance or doctor. These are the proper people to deal with such emergencies. Don't try to emulate their training and experience. It does not matter if it was only a very minor incident, just call. The person involved is likely to be unpredictable and might repeat this behaviour (try again) in a moment, or as soon as your back is turned.

You can still help the person in the emergency situation, as the responses of the emergency services will be often limited only to the emergency situation. You can help by giving a balanced account of the situation; going with the person to the hospital or police station; having access to a mobile phone or a credit card; or just being there to act as an advocate. In addition, all the after-care, and lots of it, will probably be needed from someone like you. By calling the Emergency Services, it does not mean that you are surrendering the ability to help, or that they will cut you out of the web of support. In fact, as a family member or friend, you will probably be indispensable.

Your choice to call for emergency assistance ensures access, at the right time, to the right type of trained people with the skills and awareness to cope with this very specialized, and potentially dangerous situation.

In an EMERGENCY SITUATION:

- Do not leave the person alone, if possible, even for a moment. Try to have other people present and in attendance at all times.
- There is a very high probability that the emergency situation will re-occur or get worse within the very near future. That is why it is an emergency. So, make the call as soon as possible.
- It is absolutely your responsibility to make sure the Emergency Services are called. Don't assume someone else will make the call. Act now.
- Even if the person in crisis begs and pleads with you not to, as difficult as this might be, still make the call. Part of their crisis may be that they don't fully realize that this is a crisis, which is a very dangerous situation. There has already been evidence of one of the above crisis situations: it may re-occur at any moment, despite their protestations. Make the call.
- If you are not sure if any the above conditions are happening, just make the call anyway. The emergency services themselves would prefer you to get it wrong, and it proving not to be an emergency, rather than not making the call and it proving to be a real emergency. Make the call.
- If it has been a very minor incident of one of the four above, make the call anyway. It can reoccur in a moment; worse next time. Call now!

IDENTIFYING A PERSON IN CRISIS

There are a number of indications, which can inform you that someone is in or is approaching a crisis. These are mainly emotional/psychological aspects. It may not be particularly significant if only one type is apparent (as we all have our odd moments); however the more types or indications that are apparent, or that can be d, can be an indication of the extent or the depth of the person's crisis.

The 9 main categories to watch out for are;

1. ABUSE OF DRUGS OR MEDICATIONS
2. INABILITY TO MAINTAIN CONTACT WITH CONSENSUS REALITY
3. LACK OF AWARENESS OF & RESPONSIBILITY FOR OWN PROCESS
4. EXTRAORDINARY OR INAPPROPRIATE BEHAVIOUR
5. LACK OF FIRM BOUNDARIES OR ADHERANCE TO AGREEMENTS
6. UNUSUAL LEVELS OF NEED OR DEMAND
7. CONTINUED EMOTIONAL CATHARSIS or CONTINUED WITHDRAWAL
8. LACK OF REAL CONTACT
9. NEGLECT OF THE SELF

(For fuller explanations of these see next pages.)

The First Rule that accompanies an emotional or physical crisis is that the person in crisis is increasingly unable to maintain normal emotional or relational contact.

A Second Rule is that, if someone else experiences the same, or a similar, reaction on a different occasion with that person, both your reactions are possibly correct and that person is in or is approaching a crisis.

A Third Rule is that, if the person is getting into crisis and being increasingly less able to cope, then the situation is more than likely to get worse than to get better.

A Fourth Rule is that the person in crisis often feels that their signals (sometimes unconscious, often a cry for help) are not being responded to properly, so they end up having to exaggerate them. They themselves are not sure what is happening. They don't know how to cope. And they may not know how to ask for help properly or directly.

Therefore calling in a professional to help them is not an indication of failure, but is possibly a means to a successful intervention and a beneficial outcome. It is impossible to overemphasize the importance of a timely intervention. An early intervention often does NOT result in a significant period of time in a psychiatric hospital. Later interventions sometimes do, and then the person in crisis has to get over the effects of that as well.

SO PLEASE, PLEASE DO SOMETHING SOONER RATHER THAN LATER!

POSSIBLE INDICATIONS OR SYMPTOMS OF A PERSON IN A SPIRITUAL CRISIS OR IN PSYCHOLOGICAL DISTRESS

Please remember - the following examples are only examples. This is not an exclusive list. Also anyone behaving in any one of these categories may just be having a bit of a hard time. Check it out. Just ask. Many times people will appreciate your awareness and concern.

Often the person is perfectly aware of what is happening or what has just happened, and are in reasonable control, and can give you a very clear, appropriate and satisfactory response. This is then not a crisis. It has a very different feeling to it than some form of a justification, evasion, defensiveness, or an attempt to cover-up a crisis situation

1. ABUSE OF DRUGS OR MEDICATIONS:

Examples of behaviour in this category include:

- a)** Going off (psychotropic) medications without proper safeguards, or supervision, or suddenly and without the full agreement of a medical practitioner. These can even precipitate a psychosis. e.g. Lithium, Valium, Anti-depressants
- b)** Mixing homeopathic, herbal or alternative remedies and pharmaceutical medications, without consent from or consultation with qualified practitioners or a doctor. Sometimes these DO NOT mix well.
- c)** A seeming carelessness about taking (or not taking) medication, about dosages, or mixing medications (as above), especially combined with some of the more socially approved drugs such as alcohol, which can potentiate some psychotropic medications.
- d)** An over-indulgence of drugs or medications or remedies *or alcohol* - "over-dose" is the classic extreme, drunkenness is also a very common example. Heavy or addictive smoking may be indicative of a latent crisis: pill-popping is another.

2. INABILITY TO MAINTAIN CONTACT WITH CONSENSUS REALITY:

Examples of this include:

- a)** Spacing out and not being able to "space back in" or "come back to earth" when requested or when directly addressed.
- b)** Having delusions, visions, altered states, etc. without a lot of control and without really realizing that they are delusional or altered states.
- c)** If someone gets very angry (or fearful) or if their latent anger (or fear) from their past experiences, which has not been dealt with, is triggered by a present situation, then they may be unable to see that their present anger (or fear) is inappropriate to the existing "fault" (or "threat").
- d)** A very exaggerated viewpoint, often about the significance of themselves, another person, or other events, that bears very little relation to the views of many other people around them. These points can include suddenly falling in 'love' totally inappropriately, or becoming obsessed with someone, positively or negatively, and giving up their normal lifestyle without any preparation, like joining a sect, or fanatical fan-club, or becoming a 'stalker'.
- (e)** Classical paranoia is an obvious example of not being in touch with 'consensus reality' - but it is rarely found. What is much more common is a form of continual blaming of situations and events onto other people; being a continual victim; and a holding onto this blame despite reassurances or evidence to the contrary; and a seeming inability to accept responsibility for one's own actions. This links to ...

3. LACK OF AWARENESS OF AND RESPONSIBILITY FOR THEIR OWN

PROCESS: Examples include:

a) Constant blaming. The person cannot or will not accept responsibility for their part. It is always someone else at fault.

b) The classic victim statement. "This happened to me - and it was terrible. Then this happened to me and that was even worse." This is often repeated without the sort of "owning" statement: "I did this" or "then I made this mistake".

c) The repetition syndrome: "Everywhere I go, this happens." "This is the fourth time this month..." "Nobody ever..."

d) There is a significant difference between responsibility for, and responsibility to (also see later). People need to be responsible **for** their own actions: and they need to be responsible **to** everyone else.

e) A seeming total indifference towards the effects of their actions, or inactions, on other people or of their 'normal' responsibilities to friends, family, commitments, etc.

4. EXTRAORDINARY OR INAPPROPRIATE BEHAVIOUR: *Examples of inappropriate behaviour, like all of these classifications, are not significant in themselves as they occur quite often in most people on occasions. They are only significant if found in conjunction with other examples. **We all have our moments.***
Examples include:

a) A person sharing deeply confidential or intimate details at first acquaintanceship or in a non-intimate situation.

b) A person offering to involve themselves much too much, often with one's private life, and from a relatively casual acquaintanceship.

c) A person under- or over-reacting emotionally to a situation which involves such emotions as anger, sadness, enthusiasm, defensiveness, etc. where the emotion is appropriate but the level of emotion is not, or perhaps where the length of time is not appropriate (either too little or too great)..

d) A person not doing (or doing) something that the rest of the group are doing (or not) without disclosing their intent, reasons or any information about their emotional state, or the extent of the deviation.

e) An excessive or prolonged activity in a person (sleeping, drinking, fasting, dancing, spending money, meditating, etc.) with a reluctance or resistance to stop, and often with a defensiveness or inability to explain why they are over-indulging.

f) An experience of a sense of confusion or wariness when in contact with a person that seems to be engendered by their behaviour and that this feeling is also experienced by others on different occasions with that person.

g) The absence of any emotion, affect, or a sense of withdrawal from other people or life, especially if the reason for this is not properly communicated.

5. LACK OF FIRM BOUNDARIES OR ADHERENCE TO AGREEMENTS:

Examples include:

a) A person increasingly breaking rules, boundaries, rhythms, constraints or agreements. They may attempt to involve others in this, or may get increasingly vehement, aggressive or defensive about their rights or justifications.

b) Alternatively they might be very apologetic or continuously make promises (never to do this again) that are just not kept.

c) An unwillingness or an inability to maintain or to form an agreement so that there seems no hope of resolution unless someone (you) has to compromise their (your) own position or make an exception for that person. (You need to have a good level of objectivity for this category.)

d) A sense, when one is with the person, of them being scattered or uncontained or unbounded or over-euphoric or hyper-manic, that is also experienced by others on different occasions with that person.

6. UNUSUAL LEVELS OF NEED OR DEMAND:

Examples of this category can include:

a) Spending an inordinate amount of time with a person or giving them lots of attention and getting no feeling of resolution with or satisfaction from them.

b) A person who makes out a special case for themselves in nearly every circumstance. This is often accompanied by a heightened sense that it is they or their need that matters and that no-one else's is really important. (Selfish)

c) A sense of being drained whenever one is in close contact with the person that is also experienced by others on different occasions with that person.

d) A person is increasingly involved in a frenzied or continuous level of activity over time without let-up and usually within a particular sphere or project, but can also apply to work. This is sometimes called "manic".

e) A person who has been "window-shopping" through all the available therapies; trying the "smorgasbord" approach (a little of everything) and yet never seeming to stick with one thing or be properly satisfied. Their reasons for their dissatisfaction may, or may not, be significant.

7. CONTINUOUS - EMOTIONAL CATHARSIS or WITHDRAWAL: *Behaviour in this category is really only significant when the first word "Continuous" is applied.*

a) Someone who breaks into an emotional state - old memories etc. - and starts crying, abreacting, getting angry or depressed etc. and then cannot seem to get out of this or stop that pattern. It is good that it is coming out. It is not so good if they cannot stop and leave it.

b) It is fine for someone to be withdrawn - especially if they can say they feel a bit withdrawn and perhaps give a clear, simple reason. It is possible indicative of something else if they stay withdrawn.

c) Someone who is out of contact, may just be spacing out, withdrawn, wholly or unable to express themselves clearly and, God knows, that sometimes happens or is necessary and/or helpful. If they are staying out of contact, that can indicate a problem.

8. LACK OF REAL CONTACT:

Examples of this category can include (also see below):

a) A person who is avoiding issues which are obvious to those around them, and yet refuses to respond to their concerns or questions.

b) A sense that this person is not making proper contact on a day-to-day basis, only going through the motions, and that there is not really anyone there when talking about 'real' issues.

c) A regularity of a withdrawal situation so that there is a disassociation with any degree of continuity.

d) Someone who continually shifts into somewhat disassociated topics, or who talks about issues in a very disassociated way.

e) Someone who talks continually from one particular perspective (eg: work), or on one particular level (eg: social) and never seems to be able to, or willing to, talk about anything else or on any other level.

f) A person who is very self-absorbed and it seems as if you, the other, don't really exist for them, so there is no contact from them to you.

9. NEGLECT OF THE SELF:

Examples of this category can include:

- a) A person not washing, sleeping, eating, being tidy, having clean clothes with this behaviour becoming prolonged and seemingly on the increase.
- b) An increasing withdrawal, often rationalised by the person as "I don't feel like it", from their usual activities and very often accompanied by statements indicating a lack of self-worth.
- c) Excessive or prolonged activity in one confined area with a reluctance or a resistance to stop, and that activity seems to be increasingly detrimental for that person.
- d) A sense of depression or sadness or neglect coming from that person that is also experienced by others with that person on different occasions.
- e) An increasing use of escapes like T.V., meditation, studying, leisure activities, hobbies, or drugs like alcohol, tobacco or tranquillisers etc. where the usage level is becoming seemingly detrimental and with either promises to reform that do not materialise or a strong resistance towards admitting that there is any problem.
- f) Someone working too hard and getting increasingly irritable or explosive and unable to stop or find a way out of their dilemma - the neglect comes in putting the work before the person themselves. This is a classic burnout syndrome.

The symptoms of burnout are: being exhausted all the time, not matter how long you spend in bed; a sense of isolation from other people, to the extent of becoming a recluse; low self-esteem; ineffectual, no matter how many hours of work put in; a feeling of emotional deadness, or of being trapped; chronic or sudden bursts of anger; loss of empathy for other people's problems; an increase in sarcasm, cynicism or general disparagement; loss of sense of humour; loss of sex drive in a relationship, but an increase in casual sex or other addictive behaviours; an increase in physical problems including back and heart pain, headaches, frozen shoulder, chronic fatigue, adrenal or thyroid problems, irritable bowel syndrome, post-viral illnesses, and other illnesses, sometimes major like heart attacks brought on essentially by stress.

It must be re-emphasized that you can probably classify everyone you know into one of these categories at any one time or another. So they may only really be significant as an indicator of a person in crisis under the following sets of circumstances:

- a) **if you (and others) experience a person as being in more than just one category,**
- or
- b) **that the category of behaviour they seem to be exhibiting is fairly continuous and also escalating.**

CAVEAT - Beware of significant cultural differences. What is appropriate in one culture is often not appropriate in another, and visa versa. Many cultures have certain rules of behaviour, and not abiding by these rules could be a significant indicator for a member of that culture; whereas in another parallel culture, nothing significant could be drawn from this. So, in a multi-cultural society, whose standards are you judging them by?

CRISIS OR EMERGENCY

It may be worth noting here, before we go any further, the traditional definitions of or distinctions between **a crisis** and **an emergency**:

- An **emergency** should be able to be resolved within about 36 hours - that is to say the person should be able to cope by themselves, or with normal recuperative care, within that time period.
- A **crisis** may still be occurring after 36 hours and will not end until the person can cope with their life situation as well as, or better than, before they went into the crisis.

It is more than possible to have both going at the same time. An ongoing crisis can suddenly become escalated into an emergency situation. The emergency can then be resolved and be got through, and yet there is no resolution to the ongoing crisis situation.

There is another definition, which will be dealt with later in the second part of the book: that of a “Spiritual Emergence” process that goes astray and then becomes a **“Spiritual Emergency”**.

A crisis can happen to anyone at any time. The chances are that we will have several in our lifetime. They can be seen as something almost natural, inevitable even (like Life Crises); something that we might have contributed to (Personal Crisis); something to overcome (Environmental Crisis or Disaster); something to learn from; something to endure or survive. It has become a crisis because our ‘normal’ survival techniques are not working. We may survive, but things may not be the same.

An emergency is when there is a severe risk that we might not survive; or that things might never be the same again.

It is good to get help in a crisis: mainly because it is not easy to get through a crisis by yourself. In an emergency situation you will absolutely and definitely need some form of specialized help. This is another distinction between a crisis and emergency.

Remember another good indicator of a crisis is whether or not the person can stay in reasonable contact with other people. If they can’t, then that person is almost certainly in a crisis. In an emergency situation, the person may not be able to do anything to help themselves, and they also may be, in some way, totally out of touch. There is no proper contact.

This takes us onto the next section, which is also somewhat diagnostic.

MAKING CONTACT & STAYING IN CONTACT

In defining this concept, I am trying to give a feeling of how contact is often **not** made, without reference to any particular situation, time, place or type of crisis. Any of these 'lack of contact' states might also affect you: you may feel you are out of contact with them, rather than they are out of contact with you, or those around you. Types of situations in which there is a definite lack of contact may include:

A. The person is seeming very distant, or not really present, possibly with their mind drifting, or possibly very spacey, or with a sense of fuzziness or vagueness about them and what they are saying and you are not quite sure if there is or isn't.

B. The person is being quite disjointed, or is not keeping to the point, or telling long, complicated stories of doubtful significance, or continually changing the subject, or playing with words (rhymes or puns), so that you only get little glimpses of where they are and not a clear, coherent & comprehensive picture from them.

C. The person is claiming to be someone else¹, or to have special knowledge about the way that someone else thinks; or to have direct and absolute contact with some mystic being.

What makes this different from a healthy spiritual revelation (which sometimes also happens) is that you are unable to manage to keep a sense of the person in front of you as well as a sense of what the special knowledge, information or channeling is all about. Being in receipt of this sort of information does not mean that *you* disappear: sometimes it feels that you do.

D. The person may be very depressed and/or diminutive about themselves, coming out with statements like "I don't really matter" or "It's not important how I think", to the extent that you get the feeling that you are hardly with a person at all, just a shell, or a blob, or something pretty amorphous. You may find yourself encouraging them, or trying to talk them out of this state. This is also a form of lack of contact.

E. The person is being very obsessive about a particular event, incident, or topic and continually comes back to that particular subject whatever the situation or topic is at present so that contact with them is very limited in terms of content.

F. The person that you are with is expressing emotions that are valid, given the set of circumstances, but the level of emotion is considerably over the top (or denied) and there is a seeming lack of contact with this exaggerated (or underplayed) reaction. Their level of emotion is taken as "normal" in the circumstances by them, and is obviously not normal.

G. The person is seemingly very coherent on a moment to moment basis, but a few minutes later will either totally contradict themselves, or will have "forgotten" that something was said or agreed so that there is no real continuity

¹ This is unlikely to be in the form of someone thinking that they are Julius Caesar or Napoleon - more likely that they are Jesus or a reincarnation of an Egyptian Priestess of Isis!

over time. People in the early stages of Alzheimer's have this as an increasingly chronic condition. For people in crisis, it is slightly different and comes and goes more frequently.

H. There is contact with one aspect of the person's personality, but there is virtually no contact with another aspect, or any other aspect: and then it changes. It is almost as if two people or two different personas, are inhabiting the same body (which may actually be the case).. Sometimes the lack of contact is between these two personas: i.e. you may be able to relate to both, but they are not relating to each other. Confusing? = Lack of contact.

I. There is a lack of contact with "consensual reality" (mentioned earlier). What they might be saying sounds wonderful, except that the world just doesn't work that way. They may have grandiose ideas that Nelson Mandela will be interested in their ideas for a "peace plan" or something, and they have just faxed him these ideas, and are now awaiting a response (viz: "and they have done it from your machine and have to stay in your office till he replies").

J. They have just now decided to... make a significant change in their life: divorce their partner: leave their job: stop the medication they have been on: - immediately, despite having no contact with their partner, or boss, or despite what has been said by their doctor, who "doesn't know anything", or "who just doesn't understand" or whatever. And all this is on the basis of a Tarot reading, or because they had a dream, or came to Findhorn for the weekend, or whatever. Out of touch!

K. They may have suddenly ceased all contact with a particular member of their family, friends or workmates. However contact with this person may be essential or necessary, at least for the moment, and some form of contact must be restored (it could be for a parental, logistic, or financial reason).

Make sure you don't get caught up as a go-between – because of their particular form of crisis: advocate or negotiator is perhaps a better role, albeit relatively skilled, and it demands a quid-pro-quo and being in contact with consensual reality and degrees of reason and rationality.

Once you have identified that the person is – really and truly – in a crisis, the next section follows on directly:

WHAT TO DO AT FIRST

If you find yourself with a person in a situation such as described, and you do not have any sort of therapeutic contract with them, and you do not have a lot of experience in this field, then you MUST try to get in someone who can help therapeutically. This is the “appropriate action”. Please read the whole section.

Getting the person in crisis to a point of a successful intervention.

A. You should or must inform:

- (i) someone who is in direct contact with that person (i.e. a member of their family, flatmate, etc.) and, if this is appropriate,
- (ii) someone in their place of work or organisation. Ideally one of these people, or you, will then get in contact with:
- (iii) someone who has experience of working with people in crisis. (Also see the “Resources” List)

As the person is possibly demanding some sort of a response by this type of extraordinary behaviour, they will often continue in this type of behaviour (or worse) until an appropriate response is made. The person’s extraordinary behaviour may even exaggerate itself until an appropriate response is made.

An appropriate response can usually only be made by someone who is relatively skilled at, or trained in, crisis intervention. Your task now, having identified someone in crisis, is to find this person and get them involved. The rest of this section centers around this point. So:-

B. The sooner an appropriate response can be made, the easier and better the resolution will be for all people concerned.

This particularly applies if there has been any disclosure about previous mental illness, breakdowns, psychoses, psychiatric treatment, or if the person has been prescribed any of the psychiatric drugs. (see Appendix)

Sometimes people try to deny that a crisis is really happening. They are trying to hold it off. A slight escalation of their situation may bring on the crisis, but the person's character pattern or whatever is determined not to admit this. This aspect may have to be confronted, and as soon as this is done, they will then be able to ‘have their crisis’. Though this may also mean that they might also try to run away from it, or you, as you have confronted them.

An appropriate response is for the person in crisis to be met by a person with some experience or skill in these matters. This could be almost anyone, and it is quite dependent on the type of crisis.

Sometimes the person in crisis cannot help himself or herself easily, it is therefore up to the people around them to get them the appropriate help. Getting help is essential. Getting the right help is desirable. Don’t delay too long trying to get the exact ‘right’ person.

*** **Now**, check out the note at the bottom of this section now to see if you are the appropriate person to continue, and, if you are, then continue: otherwise stop.

C. Confront them gently, especially if you have any position of authority or responsibility, or if you have any special relationship with them, and try to get some more detailed information - then check this information out.

Good accurate information is really vital at this point. It may help determine who makes the successful intervention, how, when, and where.

- Is it going to be a psychiatrist; a social worker; a psychotherapist; a priest; a counsellor; someone from the SEN Network, or what?
- Is it better for them to stay where they are, or at their home, or in another special place (yet to be identified)?
- What resources have they got? – money, credit cards, available shelter, belongings, tickets, support, friends, family, etc.

It may be necessary to ask specifically about some of the points mentioned above, and about the history of their crisis, especially if any suspicions have been aroused that it might actually be an emergency situation, rather than a crisis. Hints about aspects of their history, medication, damage, etc, are often dropped gently, or picked up from other sources. Disclosures are often made subtly - but not necessarily to you! Ask the person, and then ask others, to see if the stories tally and complement each other, or are contradictory.

D. Find out more information from those people around the person in crisis, and from the person themselves, and try to build up a bigger picture.

Ask their flat-mates, partners & others in their work group/department or whatever event or programme they are on. It is always worth trying to pick up bits of information in odd moments.

You sometimes do need to meet and sit with the person in crisis – they need to be present, and see you are working for them; you should not do of this all from another office. The person who is in crisis is often quite desperate to talk about himself or herself. Anything they say (because of their exaggerated emotional state) is probably very relevant, but it may not be complete, or it may be distorted a bit. It helps to build trust if you listen properly. When chatting, the person often relaxes and is less guarded and when being "interrogated" their defenses are up and stronger.

E. Now make the call!

At some point shortly after you have got as much of the necessary information as you can get within a reasonable time frame, it is then the time to make the call, or calls. You are trying to get specialist help for this person. You are not a specialist; you do not have the available resources. They're out there somewhere. It is now your job to try to find them and get the person in crisis the appropriate assessment or referral. At this point you may need someone else to sit with the person in crisis, as it is quite difficult to speak about someone to someone else in front of them. You may need to make several calls. Be as factual and succinct as possible. Take notes of whom you call, their number, and what they say. Always ask the person you are speaking to on the phone if they have any other ideas about referrals to who could be a suitable person for a crisis intervention. Try to establish an idea of times, availability, contracts, payments, etc. Don't be in a position where you have to wait too long; get someone here now, as soon as is reasonably possible. It is a crisis! You are also just making a call about someone who is in crisis. You are not becoming responsible for saving their life; or their soul. You should not commit yourself to anything that you are not prepared to do or unable to do with this third party. They (the people you are calling) are some sort of relevant professionals. They carry a certain degree of authority, responsibility and hopefully also a degree of "responsibility". Check their referral criteria: does the person in crisis fit?

F. Report back.

Tell the person in crisis what is happening: what you have done: what you think might happen now. That means you are being as honest as possible with them. You don't have to justify anything, but expressions like: *"I think that you are having a crisis and that means that we should get in some specialized help: so I have called So-&-so."* This may be sufficient. The person may have a reaction: that's OK. You have made a decision that, given the circumstances, you think is the correct decision: and that's OK as well. These are differences of opinion and will get sorted out eventually.

Tell the other people involved on a "need-to-know" basis: who and how much. Some people just need to know you have called someone and that someone is coming to help. Others may need more detailed or specific information. Do not necessarily feel bound by any confidentiality. You are not a professional. This does not apply to you. You need to get the person professional help. They need to be informed about the full situation – all the details.

G. Then stay in contact.

The person in crisis will sometimes move in and out of contact with you, and in and out of contact with consensual reality. This is quite normal for someone in a crisis. Gently plot this movement. Notice when it happens and what triggers any changes. Just try to make sure that you are in contact with them, and stay in contact with them, even if they are not totally in contact with you.

Read the section about "Staying in Contact".

Make sure, if you have to leave and someone else takes over, that they have all the relevant information. This is part of your "staying in contact". Write down all important information, before you leave.

H. Create as much of a relaxed situation as possible. Defuse any panic.

Get rid of the kids and any other anxious people around. Just chat. Get someone else to make a cup of tea for everyone. Act pretty normally. There is nothing to do now except to wait.

Remember it is often YOUR fear or anxiety that can escalate a situation. The person in crisis will (inevitably) sense it and may also re-act to it. So just wait for whom-so-ever you have called to arrive, or for the time of the appointment, and until then, make sure that the person in crisis doesn't go off alone somewhere by himself or herself. Always go with them; you can wait just as well walking along the streets, or sitting in the park. Take a mobile phone with you so that you are still in contact and contactable.

I. It is nearly always worthwhile making some case notes.

FIRSTLY this helps you keep things reasonably clear. SECONDLY you may not overlook or forget things if you keep such notes. THIRDLY you may have to make a summary to someone else and these notes could help you do this. FOURTHLY you may have a degree of responsibility or accountability, either for others or in respect of this person, and the notes can help you should how you exercised that responsibility. FIFTHLY you may have to write up the situation. SIXTHLY it helps you review the situation, by yourself or with others, especially if you make a mistake you want to learn from. SEVENTHLY, as mentioned, you may have to leave and 'hand over' to someone else. Make the notes.

***** NOTE:** From point C onwards, you should be fairly committed to and available for the first stage of this unfolding process:

Getting the person in crisis to a point of a successful intervention.

If you aren't committed, or you can't so commit yourself to continuing with the person in crisis, then get someone else in who can. You may be just about to go on holiday, or you have kids that need to be picked up from school, or you need to lead a workshop now, or have to get a contract signed, or whatever. So get in someone else, anyone else, and then go and do what you have to do. Tell them what has happened, give them this handbook (if this feels appropriate), and ensure that you "hand over" properly.

You can ask the person in crisis who they would like to come in, to be with, or to make these arrangements with, for a while: you may be pleasantly surprised. They often have resources that you are unaware of. They may already have a therapist or counsellor, or they may have an affinity with someone else.

Tell them why you have to leave and that you will/may be able to come back later. You may be freer then, and have more space and time, and can come back in and help out later without any conflict. The person in crisis should be able to understand this. Be clear about your parameters, and do not promise to do anything that you cannot commit to happily.

There are also different roles to take in a Crisis Group (see later) and you may well fit into one of these roles: a role that is more appropriate for yourself.

Consider thanking the person for the privileged of becoming involved in their process.

BASIC STEPS & GOALS TO RESOLVE A CRISIS

1. Gain the rapport & trust of the person in crisis & the people around:
2. Formulate clear definition of problem.
3. What has already been tried? By the person; others; therapists?
4. Focus on different perceptions of reality - how do they differ?
5. What is the person's own perception or dynamic?
6. What are possible goals for treatment, or jointly achievable aims.

APPROPRIATE ACTION

The aim of this booklet (and of a Crisis Group) is to attempt to provide a more appropriate set of responses as early as possible to someone in a psychological, emotional, or spiritual, crisis.

It must then be the ultimate aim to assist that person to regain their normal functioning to a level as good as or better than their pre-crisis level as soon as is reasonably possible.

There may also be a transformative element or component necessary here, so this may take time to achieve, but there should be a sense of what is a good direction or outcome from a reasonably early phase in the intervention process.

So, as we have mentioned, if someone has been identified as being a person in such a state, contact should be made with somebody who has definite experience of crisis work and who will come and help assess the situation, quickly and discretely. This is essential.

If there is no way of a professional being able to get to the person in crisis easily, another or an additional course of appropriate action is to help the person in crisis to set up a crisis group around them: to create (or re-create) a sort of community around that person in crisis. Sometimes, someone who is aware of the parameters of a crisis group can offer this sort of organisational help very successfully over the phone. The parameters of a Crisis Group are dealt with below (page 25). This sort of 'holding situation' may be appropriate in such cases.

Much of what is called "appropriate action" here revolves around having a much more 'useful' or supportive perspective of the person who is in crisis and what it is all about for them. If you see them as dysfunctional, this will not help them. If you can identify with the times when you might have been in crisis yourself, and then try to empathize with their position, you may be of more use. You will only really be able to help them from a position where you are supporting their "process", rather than telling them they are "wrong" and what they should be doing "right". This is instead very much more of a developmental "process-oriented" type of work, rather than a black-white, right-wrong, polarized situation. How can we help you move to a slightly better state?

This is not to say that, at relevant points, you cannot help them cognitively understand their situation better, if that is what they indicate is needed: nor is this contradictory in assisting them to work step-by-step towards a better way of doing things, if that is what they decide that they would like to, or need to do. There may also be systems of thought or well-defined perspectives that might be

appropriate for them to consider whether they fit into these or not. Occasionally it is helpful people to identify themselves into a category like “alcoholic” or “co-dependent” or “addictive” or whatever. Rarely is it appropriate for you to do so.

Please be very careful here: much of this sort of re-assessment depends upon new perspectives, which help ‘expand the frame’ of their situation. Whilst this may mean a form of re-education for the person in crisis and for those around them, please ensure that you are not forcing them into a new perspective, which is more familiar to you, than relevant to them. This is especially relevant where one considers whether the person is, or is not, fitting into the Spiritual Crisis or Spiritual Emergency category (see later). What has also been mentioned, and now is re-iterated, is that there are sometimes significant cultural differences, which will affect this process.

Doctors and psychiatrists may be helped in such changes by assuring them that “Spiritual Crisis” is now a category in DSM IV (see Appendix).

What follows now are some very different set of ideas that may help change some of the more fixed or conservative attitudes that tend not to be so helpful for a person in crisis: from themselves and from others.

Often these crisis states can also be a cry for help. One of the better responses is to react as soon as possible to the basic need, rather than to the symptoms of the crisis (which may actually be self-defeating). It may be that someone can help with the identification of this basic need through their experience or training, so please use the talents that exist around. To establish some of these basic needs with the person in crisis, some counseling or psychotherapy is probably an essential prerequisite

Teamwork is paramount in any form of crisis intervention. It may be that the most appropriate response will be to continue your contact with the person, but (and this is absolutely essential) with proper back-up and support from several others. It is highly unlikely that you, or any other single person, can provide the person in crisis with everything that they need to regain their functioning, or to get out of, or through their particular crisis.

Alternatively they may possibly some help need to get out of their present situation (with you?) into a more appropriate situation (for them) and the crisis symptoms are a cry for help and a (sort of) method of achieving that end. Either way, teamwork is very important, and if you are a part of their crisis, or represent a part of their crisis, you (and they) will need some outside help to sort it all out. A crisis situation can sometimes run for 36-72 hours non-stop. How long can you stay awake? How useful are you three-quarters of the way through that period. We therefore recommend the structure of the “Crisis Group” (page 25).

There are also some organic conditions, such as certain mineral deficiencies, withdrawal from certain drugs, or certain types of epilepsy, that can imitate psychiatric symptoms or those of extreme emotional distress. As it may be important to distinguish these organic and medical situations from true psychological, emotional or spiritual crisis symptoms, some level of medical or psychiatric assessment sometimes has a very important role to play in helping to identify what is the most appropriate response. A person skilled in crisis work will usually know when to call upon medical diagnostic skills and at what point -

whether or not medical treatment is eventually used. Please suspend any (possible) biases of your own against the medical or psychiatric profession: they contain many kind, very knowledgeable, and dedicated people. They also have access to many resources, and a medical cabinet is just one of these.

Contact someone. Whenever the question arises around a person in crisis, "Shall we contact a psychiatrist, psychotherapist, a member of the Spiritual Emergence Network, or whatever?", always, always, always try to veer towards doing so. The thought itself usually means that either a crisis is precipitating and that you are beginning to recognise it, or the thought can be a part of your deep wisdom and intuition working to solve the problem which your cognitive mind is having a difficulty with. The contact you are seeking might be to get supervision, support, and advice for what you (and the others with you) are doing reasonably adequately at the moment.

Situations like these often get worse before they get better. A timely intervention and appropriate action can often really help the person and even defuse the crisis, as the message to the person is that they are being taken seriously and thus do not have to develop a full crisis to get the attention or aid needed. Alternatively, to delay can mean that the situation gets a lot worse and the "appropriate action" then is often much more costly or traumatic (emotionally, time-wise and financially). Sometimes, the appropriate action is to do nothing: but this must be determined specifically, and most other possibilities eliminated first.

As a rule of thumb, always inform the person what is happening; why you have decided to take this action and what is going to happen next - even though they might not like it. There is no reason to treat them as anything less of a person just because they are in crisis. Crisis can often include a level of paranoia which is not helped by whispered conversations and strange people suddenly appearing and asking a lot of questions. If needed, refer to "authority/ regulations/ procedures etc." as a justification for calling someone else in, even though there may be some resistance to this - even though there may be some resistance to this. It also gives them an opportunity to say "No" and suggest an alternative that seems appropriate to you (and others) as well.

Always have someone stay with the person. It is not good to leave someone who is in or near a crisis alone, for them or generally, even for a moment. If possible, always have someone else present and in attendance as well (or on immediate call) at all times. A person in crisis can do sudden and weird things without any previous warning. Unfortunately, one usually only learns this by experience. Bathroom doors should stay ajar: privacy, but also accessibility: there are many things in a bathroom that a person in crisis can use to abuse. Anyway, we've made the point!

Be clear and direct. It might be necessary to be quite firm and matter-of-fact at times and to tell it just how it is. *"This is what is happening; this is what has happened and it is important that you (the person) stay here until such & such else happens. There seems to be a crisis and I have taken charge for the moment. I have also called [the police/ ambulance/ for a psychotherapist/ or whatever]. I may be wrong, but it's best to be on the safe side, and anyway it's my job/ the clinic's policy etc."*

Try to Work with the Person's Process. Try to speak to them in their language, and in their terms. Try to ensure that you are genuinely on their side and working for their benefit. If there are conflicts of interest, then maybe you can take a different 'role' and still support them in some way, whilst being also true to your other interests. "Working with the person's process" is not a license for them to do anything they want and you all to run around trying to support and facilitate them; it is a deep and sincere attempt to help them expiate themselves out of their crisis situation, which may be a significant and meaningful point in their lives if given this respect and opportunity. It is respect for the person; the factors that brought them there; the environment they are in (and the people around them; and for your own part in their process. For more fundamental components of working with people's processes, please consult the reading list: Mindell's work is particularly good in this respect.

Crisis states in others can, will and do affect you emotionally too. This effect is also one of the indicators of a crisis. You are (hopefully) monitoring your own emotional reactions all the time. However, when you are eventually clear of the situation, take some time to "get clear" yourself; a shower will help; or talking it over with a friend & crying on their shoulder; getting angry or whatever you need to do. You must look after yourself. No-one else will do that for you. Do this before you go and do anything else significant.

Use cleansing techniques liberally. Light a candle. Use incense. Have a long shower. Plants are good and help absorb energy; do a bit of gardening. Walk on the beach or by the river, if you can. Sunlight, wind and rain are really good cleansing agents. Watch a bad or funny movie. Get a support person for yourself. You can also cleanse yourself by catharting a bit: shout or scream, bash cushions, laugh, cry. And/or you can also cleanse yourself by whatever form of meditation you find appropriate for yourself.

FORMING A CRISIS GROUP

Components of a Crisis Group:

There are four main components within a crisis group and these are usually mutually exclusive in that these roles do not mix. This is a very important "caveat" - something to 'beware' or be aware of.

The Companion(s) or Carer(s) - a person in crisis needs extra help and support - at differing levels according to their need - sometimes 24 hours a day - sometimes for a half-hour chat twice a day. The person in this role is not a therapist - the role is to be a companion or friend. They need to come from the heart, purely and simply. A lot of helpful therapeutic work can be done - but only from the positive reinforcement side. This can be an unskilled role - a very loving one.

The Facilitator or Therapist - this role can also be positive but at times the person here may need to challenge the person in crisis's attitude or process. It is difficult or even impossible in extreme cases to support and challenge. It is much easier to separate the roles. The facilitator has an overview of the person's process and may also help direct the crisis group. There is implied a fair degree of training and experience here. Hopefully there is also a reasonably democratic process as well. It is the person's process after all. Other people have to agree whole-heartedly as they may be doing the work. Both these first two roles are centred around the dynamic of the person in crisis. The people should stay centred with that person and limit all contact to anyone else with the family etc as far as is humanly possible. This role is taken by:

The Gatekeeper or Guardian - whose job it is to protect the person's process and see that it can happen undisturbed. A safe space is created. This can be the administrator who will also negotiate finances and placements. It can also be the person who organises rotas etc. Information to the outside is channelled in and out through this person. This is a hard role.

The Process Supporter - is the person who backs up the process, who supports the supporters, who works with the rest of the family to create a different and better environment for the person in crisis to emerge into. This work with doctors (perhaps), family, friends is most important as this group can and should take over from the crisis group if they are not involved as such already. The supporting the supporters aspect is also very important as the carers (particularly) can get very drained.

We have also found it very useful to keep a journal/diary/log book of the crisis process with everyone (crisis person as well as helpers) writing in anything: dreams, events, impressions, feelings, times, freak-outs, medication etc. This is really useful for the person afterwards to help integrate their crisis and get the full picture of what happened.

Acknowledgements to Joseph Berke: Arbours Association

FORMING A COMMUNITY AROUND A PERSON IN CRISIS

It is also sometimes impossible to work with a person as a therapist alone. The person needs or declares their need for a wider 'community' in which to have their crisis. An example might be of a person still living at home who has an emotional breakdown. In this instance, probably staying at home – the environment that they had their crisis in, might not be the best solution; they may need some time and space away from the home in order to discover what their next steps are: yet it needs to be a relatively safe space. One client I worked with by telephone consultation in this situation 'remembered' that a cousin, living in a nearby town had a spare room in their flat. I encouraged them to follow up this idea, and also suggested that they explain to the cousin some of the things we had talked about, so there would be a context to their situation and a support for that person in crisis. I also encouraged them to take this opportunity to follow up another idea they had had: of taking up art classes; an idea that their parents had disapproved of. I felt the extra support that they might gain in this situation, and the new people they would meet, and the widening of their boundaries, and the 'fresh start', and the personal interest, all justified supporting their suggestion. In effect I was encouraging them to create a community around themselves in their crisis situation: a more supportive community.

In another instance, a member of our extended Findhorn community went into crisis when s/he was living on the West Coast of Scotland. In this instance, s/he felt that s/he needed much more support and a much closer "family" feeling in order to get through their crisis: this was again working with them initially over the phone. So we agreed that they should come over to the Findhorn community, and, since they were very shaky and almost borderline, in this instance, I actually drove across Scotland to meet them off the ferry and brought them back to the community where we 'commandeered' an empty bungalow and set up a daily support rota with those people who s/he had nominated, and who had agreed to help. For three weeks we all worked with this person as s/he went deep into their crisis; the darkest fears and the blackest moments. We all wrote down, in a sort of logbook, what we had done, and what we had perceived and felt whilst we were with this person: whatever the role: carer, therapist, supporter, friend, etc. This turned into a record of this person's crisis that was very useful to them later on in their integrative process. No-one got over-loaded; no-one got stressed out; and yet there was a continuity and a level of support that allowed a depth of working that I have experienced rarely in my 20 or so years of work as a psychotherapist. At one point in this particular person's therapy work, s/he mentioned that s/he was worried that s/he couldn't make enough noise, as, even though the bungalow was relatively private, s/he felt there were still people around who might be disturbed, so we went into the sound-proofed recording studios and there s/he explored the noises that s/he wanted to make. The finding of her 'voice' also allowed him/herself to regress to the point at which their deeper self could emerge and start to be recognised more fully.

There are other ways in which one can consider creating a community around a person in crisis. Sometime the support and personnel are there, but the understanding isn't. So the task here has been to educate the people around in the concepts of crisis work and process work and to encourage them to adopt some of these roles, and constraints. This coming-together for a common purpose

with an educative input has been sufficient to create a sort of community around the person in crisis for them to feel that the contact and support they receive is helpful and constructive; and with that, and the emphasis on self-directed strategies and process, they have been able to have their crisis successfully.

I emphasise, again and again, that when working with a person in crisis, it is really important to really listen to their story, and behind their story. If they report, or it is reported that, they spent three hours with person A in (say) the kitchen or the pottery: firstly, *“Hey, That’s great! You must have really enjoyed being with them.”* And secondly ask *“What did you get from being with them?”* What is the aspect of their process that took them there and kept them there? This is often the significant material.

In a community setting it may also be possible to find out from person A what their experience was of the person in crisis for that three-hour period (Guardian Role). This can be very helpful if part of ‘creating their community’ can in future include person A in some role or other. It may be necessary to encourage the person in crisis (Therapist’s Role) to discover from person A whether they can go again; or discourage them from going again to person A, if it transpires that the Guardian’s report is negative.

Maybe it is possible to get the ‘something’ that they got from person A, from another person B in future; or in some other appropriate way; and so we come back continually into the therapeutic exploration of the person’s process; what the person needs and how they might achieve it.

Sometimes, though fairly rarely, the person in crisis has not been able to cope with the expansion and break-through components that they have come to in their crisis. They have wanted instead to back-off from the crisis and restore elements that existed previously. Whilst one can never completely turn the clock back, here the therapist’s role would be to support their process, and maybe help them to restore relationships that have been broken, either prior to and possibly contributive to the crisis, or which have been broken or disrupted by the extremities of the crisis. Working with others is sometimes needed.

Finally, as I was reminded in a seminar I gave on this topic, sometimes the sanctuary of the therapeutic, one-on-one, intimate, dispassionate, and confidential space that can exist in the therapy room, is what is really necessary to help the person through their crisis. This point is picked-up again in the ‘Zen Space’ section that follows later. But it helps prove the point that one strategy doesn’t fit all.

SOME STRATEGIES

There are various strategies sometimes useful for defusing emergencies and helping someone in a crisis:

- 1. Try to incorporate the person's world-view into any design.** Their language, fears, values, perceptions of themselves and others make up their world. If you can communicate with them in these terms - or in their native language - it can really help. A crisis often increases a person's rigidity of viewpoint and their alienation.
- 2. Try to re-frame.** If you can help them adjust their perceptions into something more in line with mainstream reality then they can get more in contact with you, others and themselves.
- 3. Accept their defensiveness & incorporate resistance into any intervention.** You are intervening, in some way, in their process. They can get defensive. Avoid the headlong collision. Try to keep yourself (seemingly at least) on their side, not against them.
- 4. The "illusion of alternatives"** - is where you offer a seeming choice, but both involve change. *"Do you want to go to the hospital in my car or in an ambulance?"* is a little gross but sometimes it gets to this point.
- 5. Negotiate change.** See if you can offer a "quid pro quo" or get concessions from both sides. Their strategies are not working. Yours might, but they don't know that. Make them an offer that seems attractive - rather than an ultimatum. *"You do this and then we'll do that"*.
- 6. Delay the final decision.** Anything that is final seems like the end of ... something. People are very scared of endings - death, parting, separation, abandonment, giving-up. The process will continue anyway.
- 7. Focus on their process.** It is imperative for a successful outcome that the person involved in the crisis is able to see their part in their own process. By focussing on their overall or deeper process, the intermediate ups-&-downs or the symptoms can be overcome more easily.
- 8. If it works, use it** as long as it doesn't mean lying or abuse. Tactics like: Distracting with trivia if an escalation is being threatened; Appearing confused - playing on a person's desire to be understood; Re-framing crisis behaviour in a more positive light which can help remove some shame; Limited medication; Giving them the control (but not perhaps the choice); Paradoxical intervention; Stealing the person's process - instead of them smashing up a chair, you do it; Cautious use of humour; etc. can all be used - with caution:
- 9. Alternative strategies may be better** - not only for them. They have inner wisdom - access it! Listen to your own intuition. Check it out, if possible. What has not been addressed yet, and why? What is 'left field'?

A “ZEN” SPACE

Sometimes, or often, it is necessary to allow the person to be in a “Zen” space. They may want it, or need it, or ask for it – in some way. And it is absolutely O.K. if they do. And there are just the normal safeguards that need to be taken to ensure that they are not going to be abusing the space, or abusing themselves within this space. By a “Zen” space, we are meaning the voluntary, unique and especially designed equivalent of a sanctuary, a retreat space, or a padded cell, or something in between. A “Zen” space is a quiet, safe space where the person in crisis can go to just “be”.

When someone is going through deep and powerful traumatic change, there are a number of factors that need to be considered from the perspective of what this person is experiencing. Consider the caterpillar metamorphosing into a butterfly. They absolutely need the cocoon in order to do this. This is not just an unnecessary invention; nature doesn’t work that way. Similarly as John, or Mary, is transforming into their new, more spiritual, potential, they may well need something of a safe space, a cocoon, in which to do this.

If there have been quite traumatic experiences: Kundalini, Life-Death-Rebirth, etc., then a fair amount of time is needed to just experience the effects of “being changed” by this process. What is it like to be in this new body? What effect have all these changes had on me? Who am I now? What do I do next?

A “Zen” space should be comfortable and quiet. There should be a clear rule about entry, or non-entry, for other persons. No-one should be able to come in at their own volition, or without specific permission, except in certain emergency conditions. Maybe there should be set times of the day when the “Zen” space is dissolved and freer entry, exit, and communication is resumed. These things must be carefully negotiated, built-up or “tweaked” until they are right. Just knowing that such a space exists can aid the person in crisis to get through some of the other ‘bad’ times.

Contact with nature can be excellent: a shack in the woods. The ability to paint, draw and write can be important, so these facilities can be provided. Some people like having their own music: others like the enforced silence without any distractions available. TVs and radios are probably not a good idea. Books can be good (see Reading List). Simple food and drink should be provided by the carers at regular (agreed) intervals, maybe by being left in an agreed spot, with an understanding that if it is not consumed after x hours, that constitutes a warning signal for the carers.

The ability to get up in the night and paint, draw, or write or whatever without disturbing anyone else, and then to sleep, almost endlessly, and all at one’s own rhythm, is often prized by “Zen” space users. It is very healing. One-on-one therapeutic contact with someone who is totally uninvolved and absolutely neutral, in a room that has no other connections, can also be a form of “zen space.”

PART TWO

SPIRITUAL EMERGENCE & EMERGENCIES

There is a lot more material around nowadays about how to identify a person in a spiritual crisis; what the definition of a Spiritual Emergence process is; and what a Spiritual Emergency actually is; the different types of Spiritual Emergencies; the formation of a Crisis Group; psycho-spiritual process-oriented work; and useful strategies in dealing with Spiritual Emergencies; etc.

For the purpose of this book, we are using the terminology of “Spiritual Emergence” and “Spiritual Emergency” to refer to a sudden break or involuntary change in a person’s fundamental systems of belief, spiritual activity and psychic behaviour, often accompanied by or immediately following a crisis, or a seemingly psychotic episode, or extraordinary behaviour.

However this sudden transition can also be seen (usually retrospectively) as part of a long-term developmental process that has been largely unconscious and unrecognized until that point, and thus is generally unprepared for, and often relatively unaccepted. Grof defines a number of different manifestations of “Spiritual Emergencies”, but the common denominator of all crises of transformation (according to him) is the manifestations of different aspects of the psyche that were previously unconscious.² In this sense, it can also be seen as a perfectly normal (psycho-spiritual) aspect of our human development.

Much more is being written about these aspects now: C.J. Jung referred to the process of the emerging spirit as a “moral obligation” to live out and express what one learns when one has had contact with other aspects of one’s Self. Joseph Campbell and books like *Iron John* and *Women Who Run With Wolves* or the work of Robert Johnson (see Reading List) are helping to chart the spiritual path.

A frequently asked question is: “*What is the difference between a Spiritual Emergency and a psychotic episode?*” Part of the problem of differentiation is a cultural one. We live in such a very materially and medically orientated culture that it is sometimes very difficult to step outside of these paradigms and the parameters usually blind us and bind us. When we do so, voluntarily or involuntarily, we have no positive images or support to reinforce our journey, nor any routes or maps for our process. We thus resort to the ‘normal’ negative images of people in crisis – as being either sick, mentally ill, or just crazy – and this (‘normally’) means that we need to separate ourselves from them and exclude them from us, or even protect ourselves from them. Nowadays we may also think that we need to protect them!

Just to suggest that we could perhaps re-frame these processes into a much more positive light is pretty radical, even without actually trying to do so. To suggest that we might perhaps actually involve ourselves in these peoples’ psychic processes and possibly even interact with them, or maybe even learn something from them, is seen by some well-established professional people as totally off-the-wall. If one actually does something, there is sometimes even an accusation of acting unprofessionally to ensure one keeps in line. But ‘off-the-wall’ and ‘out-of-line’ is sometimes where people actually are when they are in crisis, or Spiritual

² : Stan & Christina Grof: *The Stormy Search for Self* (Tarcher) 1992

Emergencies, or whatever, and maybe we need to be able to step into these areas to reach them, and to find out more about where these places are, and what rules exist there, in order to help them better.

Some different cultures go so far as to elevate those amongst them who have such spiritual experiences in to becoming their shamans, priests & priestesses, visionary leaders, or even gurus, whereas we in the Western World, as a culture, usually actively discriminate against those who have such experiences. We medicalise them (at best); take away their citizen's rights and incarcerate them (as well), or "re-arrange them till they are sane", chemically, electrically or surgically (at worst). How a particular treats its children, the poor, the criminal and the insane is often an indication or reflection of the essential goodness or civilized sophistication of that society. These different cultures have either learnt, over time, - or have never lost the fact - that their society can actually benefit from such peoples' processes, or it even needs them and cannot survive healthily without them. So, just maybe, many of us all have a lot of work to do, turning some of our prejudices around.

Imagine a culture – just for a moment – where normal teenage puberty and adolescence is essentially denied: variations are seen as illnesses needing treatment. Instead of saying: "*Oh, dizzy spells and puppy fat are perfectly normal. They'll pass;*" we would get a situation where the growth of breasts would mean a mastectomy; and beards, pubic hair and underarm hair would mean extensive depilation, or chemical treatments to inhibit the growth of hair. This is how we react, as a society, not to the physical symptoms of adolescence, but to the psychological symptoms of a spiritual maturation process. We treat these symptoms as a pathology, and often medicalize the treatment of the person. "*They are hearing voices; they must be psychotic!*" By the way, it is perfectly possible, and quite common, for someone to have a Spiritual Emergence process **and** a psychotic episode, or a major trauma or illness **and** a Spiritual Emergence process. They are not necessarily mutually exclusive.

However, here and now, we are concerned with aspects involved in the going through and the recovery from such events, and we delve more into this in this part of the book. In the Reading List there is also a mention of a book by Podvoll, who speaks about recovery from mental illness. He claims that the principles of healing and recovery are very similar, even though these two things, mental illness and spiritual emergency, can be very different.

What follows now is a relatively brief synopsis of the various different types of Spiritual Emergency: a fuller description of each can be found in my (hopefully-soon-to-be-published) book, *When The World Changed*. The first ten or twelve types of symptoms are listed by Grof³. However I have added to these several more categories from my own clinical experiences. The descriptions of the different types might help one to discern what is happening, or has already happened, to the person who is having, or has had, a crisis. Was it just a major illness, or a mental illness, or were other more spiritual components present? If they were these other elements present, then physical recovery, gentle exercise,

³ The Stormy Search for the Self: Understanding & Living with Spiritual Emergency. Grof, Christina & Grof, Stanislav; (Thorsons) 1991

good food, etc., which are all components of physical recovery, need to be incorporated as well as the other components necessary for a healthy spiritual emergence process, many of which are mentioned here.

It is unfortunately necessary to state this very clearly; nowhere, at no time, do we advocate someone coming off medication, prescribed by a doctor, without that doctor being informed. Dealing with someone in crisis as a Spiritual Emergency is NOT an alternative to any form of medical treatment: it is a perspective which is an adjunct to whatever is happening with them - physically, medically, emotionally, psychologically, or generally in their life at this moment in time.

The crisis, however traumatic it was, *can* often be converted into something ultimately beneficial, by treating it as a process of the emerging spirit. This connects with the “acorn” theory of James Hillman⁴, where our *genius*, our *daimon*, or our *guardian angel*, motivates our growth in particular ways uniquely designed for that particular person at that particular moment. The crisis just happens to be taking this form, in this person, at this time. There are a few exceptions, of course. But spiritual strength can emerge from such a crisis, and a new determination to lead a much ‘better’ life. This is often accompanied by an increase in wisdom, gained through the crisis events, which is part of the essential transformational process. Then crisis itself can just be a trigger for these events, and have no further bearing on the actual transformational process. The crisis can also contain very significant components that shape the later spiritual development. Everyone is unique.

Eventually there develops a better ‘practice’ or lifestyle, one component of which regularly acknowledges that “Something” which is greater than all of us – call it God, Allah, Yahweh, Gaia, or whatever. We move into new territories of the mind, and beyond the mind, into new realms of existence, sometimes only previously accessible through the use of drugs (which also distort perception of these spaces). This is the maturational process into full spiritual emergence; and it happens all the time to ordinary people all over the planet through normal processes like falling in love, being hurt, having babies, working, burying parents, etc. Most of the time that it happens, it is within normal levels of tolerance and is just not fully recognised, and so it is unfortunate that we have to point a finger at aspects of such a normal, healthy development: We have to call it “Spiritual Emergence”, so that people who are go through some of the more extreme forms of it, can be put into a similar context, and not be treated as aberrant or abnormal.

Most of the time, the “Spiritual Emergency” – the ‘emergency’ part of it - has been created, not by the processes of the person involved, but by the inability of the environment around that person to contain that person’s particular process of Spiritual Emergence at this moment in time. In many ways, the environment of the Findhorn Foundation, or other similar spiritual communities, has allowed many people to have their process there, relatively untraumatically, surrounded by others in a caring and supportive environment. I have seen notices on a member’s bedroom door, “*Do Not Disturb! Having a Spiritual Emergency!*” This is great; they are acknowledging it themselves. But we have also sometimes been called out in the middle of the night, because someone is having a real emergency

⁴ The Soul’s Code; Hillman, James. (Bantam) 1997

situation, spiritual or otherwise, and urgent appropriate action is needed. The energies of some of these places are very powerful, can affect people unused to them, and they do need handling properly.

In the 1970s and 1980s, Stan Grof and his helpers categorised a number of different types, or channels, through which people experienced their “Spiritual Emergencies”. This is not theoretical categorisation; it is empirical research. They did not invent these categories: they just collected different types from their experience, and then described them. As mentioned, some more categories have been added to this list since then; some by me, some by colleagues; again not from theory but from direct experience. These are what Spiritual Emergence processes can really look like.

However, we first have to do a little check, to ensure that we are not misinterpreting something for what we might like it to be. We have to ensure that the person is really only having a Spiritual Emergence process, and that there is no pathology, or other circumstance, that might otherwise be covered up or ignored by this process.

A Spiritual Emergency, which might be more suitable to be treated by alternative responses, can be similar to, but very different from, pathological psychoses or aspects of mental illnesses or conditions, which are often more suitably contained (but not necessarily cured as of now) by more traditional methods like hospitalization & medication. What follows are conditions which might indicate whether it is appropriate or possible to work with a person from the perspective of a Spiritual Emergence process. These criteria can also be used as contra-indications. If some of these criteria are present, then it may not be possible to work with this person on their Spiritual Emergence process.

**CRITERIA TO HELP DEFINE A SPIRITUAL EMERGENCY AND
CONDITIONS UNDER WHICH IT MAY BE APPROPRIATE TO WORK WITH
SOMEONE AS A SPIRITUAL EMERGENCE PROCESS.**

a) There are episodes or experiences which involve changes in consciousness (altered states) or significant changes in perceptual / emotional / cognitive or psychological functioning that incorporate a psycho-spiritual perspective.

b) There is an absence of organic brain disorders underlying the abnormal mental / emotional functioning of the psyche (i.e.: the symptoms of some types (temporal lobe) of epilepsy can be mistaken for psychoses, but are easily curable with a light, non-reactive pill: changes in the production of dopamine / serotonin in the brain also affect the mental / emotional state significantly).

c) There is an absence of a physical disease in another organ system, which will permit the person to undergo safely the physical and emotional stress that can accompany the working through of a transpersonal crisis - AND there is sufficient ego and physical strength available in order to go through such a (possibly powerful) process.

Such an illness or organic condition does not mean that it is impossible to work from an S.E. perspective, but it makes things more difficult; other factors need to be taken into account; or the working with or treatment of the illness / organic condition becomes more relevant.

d) **(This is an essential condition.)** There exists in the person the ability to see their condition as an inner psychological process and approach it in an internalized way with the capacity to form working co-operative relationships with people around them. This thus often excludes people in severe paranoid states, persecutory delusions and hallucinations, socio-pathic or violent behaviour, and cases where there is a lot of projection, exteriorization and acting out; or it excludes normal working with these people when these conditions are present, as one then may be working with them to get back within the 'comfort zone' of a normal therapeutic relationship.

e) There is an absence of a long history of conventional psychiatric treatment and hospitalization which tend to make the working out of a transpersonal crisis much more difficult, or sometimes even impossible, due to the physical / emotional / mental damage to the psyche from the medical or psychiatric treatments and institutionalization to date.

f) Since the line between a Spiritual Emergency and a Psychosis is unclear, any decision made should involve clear and maintainable agreements. If these cannot be maintained, therapeutic work stops, until they are restored. Firm and final diagnoses or decisions are inappropriate. This implies that there must be a continual assessment and supervisory process paralleling the personal (or transpersonal) process.

g) **(This is an essential condition.)** There exists a safe, supportive environment in which the person can go through some of the more dramatic or demanding stages with people available to assist their process, if needed, who have had similar experiences, and/or professional training, and/or who are very good for that person.

This last condition (of a safe and supportive environment) implies either special residential facilities and /or a special group essentially formed around the person in crisis. There therefore has to be a special place, a special crisis group, special agreements, and people specially assigned. If these criteria can be met, then – and only then – treating the crisis as a transpersonal process or a Spiritual Emergency **might** be more appropriate than a traditional psychotherapeutic or a psychiatric approach.

There is sometimes a dichotomy between:

- (a) Taking the person out of their environment into a much more specialized environment (a Crisis Centre, a Retreat House, a Sanctuary, etc.) where the person can have their crisis more safely, and with more resources to hand; and
- (b) Forming a crisis group around that person, in their own environment, using a 'grass-roots' approach with some specialized input.

These are not mutually exclusive. Sometimes one is more appropriate than the other; other times first one, then the other, are appropriate. However, if the crisis centre approach is used, great care and preparation must be taken when the person is eventually re-introduced back into their previous environment (see Crucial Support Issues).

Further reading on the concepts of a Spiritual Emergency can be had from the Grof's book, *The Stormy Search for Self* (Tarcher) and other specific Spiritual Emergency books in the Reading List. There is also an Internet article by David Lukoff, added as an Appendix to this book, on this precise subject.

The definition of a Spiritual Emergency, as a “religious or spiritual problem”, has now been included into DSM IV.⁵

⁵ **DSM IV** is the Diagnostic & Statistical Manual of Mental Disorders, Fourth Edition, of the American Psychiatric Association. It uses a multi-axial classification: Axis I is for clinical syndromes; Axis II for personality disorders; Axis III for general medical conditions; Axis IV for psychosocial and environmental problems; and Axis V for Global Assessment of Functioning scale. Thus an example of a DSM-IV multi-axial diagnosis might be: Axis I: Alcohol Dependence; Axis II Antisocial personality; Axis III Cirrhosis; Axis IV: Arrest, Drunken Driving, Death of a Child; Axis V: Level of current functioning 45: (serious symptoms: e.g. suicidal ideation, severe obsessional rituals, frequent disruptive / antisocial behaviour; OR a serious impairment in social occupation or functioning: e.g. no friends, unable to keep a job, criminal conviction & imprisonment).

SYMPTOMS OF / TYPES OF SPIRITUAL EMERGENCE PROCESSES OR SPIRITUAL EMERGENCIES

The common denominator of all crises of transformation is the manifestations of different aspects of the psyche that were previously unconscious.

S&C Grof: Stormy Search for Self

The following list does not mean that these types or forms of process appear by themselves or are neatly differentiated. Neither are the following examples completely inclusive. The psyche is a continuum with few boundaries, many levels, and very many different dimensions. Often aspects can appear together, or in succession, or cyclically. Categorising actual case histories and then creating an observable differentiation between them originally created this list very empirically. I have added to Grof's original list (items marked by a •).

Opening to Life Myths or Archetypes

Where one perceives one's environment and one's own process in terms and symbolic images relating to much larger perspectives. Issues of power thus become Dreams of Kingship. A cave represents an Entrance to the Underworld. Decision-making becomes the struggle between Good and Evil. Other examples include: Communing with Nature; that one has a Mission in Life. All these sorts or any sort of experiences fall into this category; and you can almost hear the 'capitalisation' of the words.

Shamanic Journey or Crisis

Where elements of the person's transformational process relate to similar experiences that are often found in earlier, tribal, or more primitive societies; like perhaps the native American-Indian. Experiences such as vision quests; the appearance of spirit guides or allies; preparations involving fasting & purification; journeys to the underworld or spirit world, often involving total annihilation or death followed by resurrection and re-birth to celestial realms or contact with ancestors, or the Great Spirit; special connections with natural elements or an identification with particular category of animal; development of different healing powers and certain types of spiritual illness all can form a part of this classification.

Communication with spirit guides or channelling

Where someone is giving out informational material that seems quite disconnected from their persona, or normal self, and has a strong consistent spiritual quality and often is couched in teaching or guiding terms, either for the individual concerned or often for people in general. Sometimes the 'channel' is in a trance (more like a medium) and unaware of this material, or sometimes they are acting more consciously. The information can be relayed by speech, in trance, or by automatic writing, telepathic transfer, visions, etc. Well-known examples include Alice Bailey, Eileen Caddy & Dorothy McLean (Findhorn Foundation); the Hindu Vedas & Upanishads, the Book of Mormon, The Course of Miracles, Seth Speaks, etc.

Near-death experiences

Where people's experiences of being close to death or even of dying and coming back to life nearly always lead to a spiritual opening and a transformational process. Consciousness can detach from the body and float around an accident

scene or a hospital surgery or distant locations (often to see a loved one); or where there is an experience a passage through a tunnel to a brilliant & beautiful source of light and there is a presence of love as well with a message that one needs to return.

These elements are the most common and not confined to those people from any particular religion. All these elements can often result in a profound subsequent shift in perspective and a new determination for the individual to live their life in a much more congruent way, often dedicated to the service of others.

Kundalini Awakening

Where powerful body energy is flowing, often in episodes, sometimes quite surprisingly. This can take the form of cycles of jerking, shaking or sweating; spontaneous movement into yogic positions; rushes of energy, often up the spine; hypersensitivity to stimuli; powerful waves of accompanying emotion; a decreased ability to control their body voluntarily; sensory manifestations - seeing bright lights, hearing inner sounds, smelling fragrances, sometimes intense sexual or orgiastic feelings; what is sometimes called "sartori"; or an experience of the powerful opening the chakras (energy centres) of the body; and, more worryingly, possible simulation of, or stimulation of, severe medical problems. It can also be seen as a spiritual purification of your body as this powerful energy sweeps (or blasts) away, cell by cell, the detritus that has accumulated over the years.

Episodes of Unitive Consciousness or Peak Experiences

Where the person experiences being at one with other people; or other things; or the whole world; or the cosmos; or merging with God. There is a sense of transcending space & time and there can be an experience of infinity or eternity. "The emotions associated with this state range from profound peace and serenity to exuberant joy and ecstatic rapture." *Grof: Spiritual Emergency*. Abraham Maslow described these states in depth, calling them Peak Experiences. They are not a form of mental disease. The eastern philosophers refer to something like this as "samahdi" and these type of experiences typically lead to better functioning and his goal of "self-actualisation".

Emergence of a Karmic pattern or "past-life" memories

Where experiential sequences occur of what seem to be 'past-life' situations or encounters (often connected with partners, parents or experiences of death).. Beliefs in reincarnation exist in nearly all major religions, except Muslim and Christian (post 553 AD).. These are however quite definite experiences or sensations for many people in this category. They frequently have a powerful transformative or therapeutic result and can often "explain" otherwise incomprehensible difficulties in their life up to this point. They can intrude quite powerfully and cause considerable confusion unless integrated.

Psychic Opening or the awakening of extra-sensory perceptions (esp)

The emergence of certain paranormal abilities is quite common and quite powerful, and thus is also potentially quite difficult to deal with. It is easy to get "hooked into the symptom" and forget that this is just one aspect of a much deeper spiritual awakening process. And this is where power can easily be abused. Out-of-body experiences, telepathic or empathic abilities, spiritual or psychic healing powers, pre-cognition, communication with other dimensions (nature spirits, devas, etc.), mediumistic identification, synchronicities experiences and many more, all form quite common aspects of this category. Sometimes these

abilities are feared and thus rejected, either by the person or by those around them. Alternatively they can become "Glamorous Powers"⁶ and be abused by the recipient.

Experience or Close-encounters with UFO's:

Irrespective of whether or not this type of experience has actually happened, or whether aliens spaceships exist, and irrespective of whether or not the person is judged by others as being insane or not; peoples' descriptions of these types of experiences, and their attitudes to these experiences, and the way these experiences are subsequently incorporated into their lives, and the resulting transformational changes that occur as a result, allow these experiences to be included with the others. Examples also include 'experiences' of alien abduction, or insemination.

Psychological Renewal through a return to the Centre:

The deep "renewal process" is where the psyche appears to be involved in a battlefield where the archetypes of Good & Evil, Light & Dark fight it out: *Lord of the Rings* stuff. There is a pre-occupation with themes of cosmic struggle and death⁷ There is a fascination with opposites and polarities. People having these experiences: "... experience themselves as the centre of fantastic events that have cosmic relevance and are important for the future of the world. Their visionary states take them farther & farther back - through their own history and the history of humanity, all the way to the creation of the world and the original ideal state of paradise. In this process, they seem to strive for perfection, trying to correct the things that went wrong in the past." *Grof: Spiritual Emergency*
Things then start to get a bit better. Quite often they might get involved in a form of "sacred marriage"; either in imagery or even in reality – possibly even projected onto someone else - and then things become fantasized as "ideal". They have supposedly now integrated their masculine & feminine. However the crisis is by no means over, even though everything now seems wonderful. Nothing has been really integrated or worked through, just experienced. Some of these attitudes can be found around in certain "New Age" therapies, like "Soul Renewal" or Re-birthing.

Possession:

This is where the individual seems to take on the characteristics of a totally different personality or becomes "possessed" with an interest in a particular field. Sometimes there is a "shadow" element in this. It can be seen as "evil". It can also be compulsive. It can also be someone who is dominated by their environment or surroundings. e.g. the Army martinet who will only ever do things by the "book".

There has been a lot of work being done with Multiple Personality Disorders - called work with "possession states" though I might disagree as MPDs could equally well be the splitting up of the personality into fragments under situations of intolerable psychic stress in order to preserve aspects of the Self and then creating a personality around that fragment as one is unable to integrate otherwise.

⁶ viz: the series of novels by Susan Howarth about the Anglo-Catholic church, one of which has this title.

⁷ -Some of the current fascination with and incidence of serial killers seems to be this happening within this perspective in the macrocosm of Western society.

Integration work could centre around the topics of respecting the personality, validating it and dis-empowering the process or the need to maintain the separation. "The remedy is always inside the experience itself". Wilhelm Reich said: "*The way we got in (to the trap) is also the way out.*"

Another description of possession is "*that we can distinguish it from mental illness because the sufferer is sane; he feels he's periodically being invaded by a malign force, but this isn't a delusion stemming from paranoia. However, the condition is extremely rare and the resemblance to some forms of mental illness makes it difficult to diagnose. ... The classical exorcism of a possessed person requires extensive preparation and an army of helpers - ... a psychiatrist, a psychotherapist and possibly a social worker in attendance along with at least three strong men, all of whom, ideally, should be priests.*"⁸

Synthesis of forms: Several of the above experienced simultaneously or serially. Remember this accumulation of events, in itself, can push someone into a crisis: one can cope with one of these situations; by two or maybe three might cause the lid to blow, or a psychotic depression to set in if your psychic boundaries cannot expand to incorporate these, your limits have been overwhelmed, or your sense of yourself flooded.

This is the end of the Grof's list: Other possible symptoms follow:

- **Addictions, drug and alcohol dependency:**

Christina Grof also lists these as a possible form of spiritual emergency, from her own experiences, and from others, and devotes a whole chapter to it in their book, *Spiritual Emergency* (see Book List). She states that the craving for the drug, or whatever, is often a craving for transcendence, the Higher Self, or God, but in a lost and inappropriate form. They also state that addictions can be developed during spiritual emergencies as a way of easing the stress. Many addicts have highly developed intuitive senses, or visionary and precognitive capacities, and this has given them many troubles and even contributed to their addictive behaviour as they try to avoid difficulties with their psyche.

- **Social Forces:**

Alternatively these sorts of processes can be 'acted out' on a sociological level involving us all. We have mentioned the fascination with (and possible proliferation of) serial killers. For many the emergence of childhood sexual abuse out of the closet into open discussion and eventual acceptance was like a revelation: we did not now have to struggle against the disbelief of society that "this sort of thing just couldn't happen in our family". It often did. With the advent of globalization, such social forces have an exaggerated effect on the whole planet. We need to consider the wider aspects. Now we are seeing again the renewal of the demonization of the 'enemy': Saddam Hussein has been called "The Butcher of Baghdad" and there is "an Axis of Evil" and a "War against Terrorism". The tabloid newspapers and Hollywood often fuel such perspectives, and maybe occasionally even help us on towards a collective form of Spiritual Emergence process whereby the exotic lives of their "stars" become more normal and accepted. They can also work the other way and demonize. Films portray subjects like contact with the dead; star gates; the development of psychic

⁸ Howatch, Susan: *Mystical Paths* (Fontana) 1992: pp 457-8

phenomena; possession; shape-changing; etc. and so begin (in a perverse way) to normalize some of these processes. Such imagery is very powerful and works on the collective. We can even see whole groups caught up in such processes, where literally hundreds of cases of child abuse with satanic rituals are diagnosed mostly erroneously. To the individuals caught up in such social forces, these can trigger off a Spiritual Emergence process.

Another form of spiritual emergence process, in the social field, could be the Olympic Games: the 'winner' is crowned with laurel leaves, is treated like a God (on Mount Olympus) and has achieved "gold" status (gold often being a synonym for spiritual transcendence. Sportsmen and women often describe the process of 'going through the pain barrier', working with their inner self, facing their fear of failure (daemon), and other experiences in terms very similar to descriptions of a spiritual journey.

- **A psychotic episode:**

This can be an extraordinary shake-up to the whole person's system. Sometimes the person involved cannot contain their increasing spiritual energy within the bounds of their own psyche, so their psyche overloads, or floods, and they have what is essentially a psychotic episode: a real one, not a mis-diagnosed spiritual emergency. But this psychotic episode can, in itself, also be a very significant part of their spiritual journey. In the episode itself, there is almost no meta-communication; but there is often a significant period of isolation away from work, family and friends. There is quite often a sense of ego-destruction and a realization that you don't really know yourself at all. You may not also have realized significant aspects of the society you lived in and the people around you, and how their attitudes to you changed dramatically when you changed. Pain can be caused and damage can be done, by the process itself, and also according to the type of 'treatment' and the length and severity of the psychotic episode. Once the episode is over and the person has recovered and is restored back into their society, their spiritual emergence process can then proceed more or less unhindered. They will have to integrate this psychotic experience and also work against the 'shock', the 'shame' and the 'black-listing' of having become psychotic; any damage that may have been caused by psychotropic medication; or guilt caused by them causing others distress. This is also a type of spiritual emergence process that it is not advisable to repeat.

- **Major illnesses and accidents:**

These often result in an enforced period of reflection, a dramatic change of behaviour, and an extended process of recovery that can be cumulatively transformative, and they sometimes have a profound spiritual component. Often, for the first time we are faced with the very real & immanent possibility of our death. Of course, not all the people suffering from these illnesses and accidents are having a spiritual emergency, but it is a significant life crisis, and the opportunity to develop spiritually is there, as ever. The essential parameters all exist and it is often used as such. People pray for the first time seriously; they confront their mortality; and their belief systems about a life after death, a larger cosmology, or the purpose and value of their life to date. If we are to normalize this process of Spiritual Emergence, then we must include the ways most 'normal' people actually change their lives. These experiences happen to very normal people and many of them happen; just read the *Reader's Digest* regularly and find out what people write.

- **Direct religious experience or conversion:**

This is a form of experience where, quite naturally, and well within socially accepted formats, people have these sorts of direct experiences, usually connected to an established religion. Leonard Cheshire, a famous war-time RAF flying officer, read the Bible one night, had a religious experience, converted to Roman Catholicism, and went and founded the Cheshire Homes; a number of charitable nursing homes for ex-service men and women. Saul of Tarsus on the road to Damascus had a vision of Christ, whose followers up to then he had been persecuting. He then converted to Christianity, became the Apostle Paul and wrote a number of books (of the Bible) and many letters to other people, becoming a major force in the early Christian church – though not always for its ultimate good. Joan of Arc, a French peasant girl, heard angelic voices, which told her to save France, and so she goes and does the unthinkable, for a girl then, guided by her voices. She puts on male clothing, goes on a journey to see the king, and then raises an army which defeats the English. There are many examples of this type of religious or spiritual emergence process. The hundreds of thousands of other men and women who have been struck by a direct religious experience, or who have received a vision, and have been transformed by such an experience, have changed their lives and have devoted their energies to the service of others: dare we really say these experiences were not aspects of their spiritual emergence process?

- **Ritual Initiation:**

In some cultures and societies, every person is still seen as a potential initiate. At some point in their development, often around puberty, they are removed from their normal society (parents, village, etc.) and put into the hands of others: (the men, women, elders or priests). They are given a prolonged experience of teaching, often frugal feeding, nearly always extended isolation, the experience of personal surrender, isolation, and often an experience involving a high degree of pain. There may be a form of circumcision, breaking the hymen, or ritual scarring. They are also encouraged to share their dreams or visions. They are sometimes given a new name. This is the way they become an adult: in that society, and thereafter they can hunt, kill, heal, or bear children. The formats differ from tribe to tribe, but the basic pattern is always there. This process is specifically designed as a transformative and initiatory experience. It is not just developmental or sociological; it is also often personally developmental and deeply spiritual. In our culture, this type of initiatory ritual is found often still in some private secondary schools, military academies or 'boot camp', the priesthood (of course), and medical doctors also go through something similar in their training.

- **Culture shock:**

For some people it is the direct experience of being projected into another culture that is the essential trigger. This can also be a culture within their own culture, a sub-culture, that they had not experienced before: someone who is suddenly arrested and put into prison; the shock of being a new parent and realising that 'mothers' are a sub-class of society; of becoming retired, or fired and unemployed and being devalued as a person because one is not in 'productive' work; or one is just doing something different, but unacceptable to the rest. These shocks to the system, the life style, have the effect of shattering many previously held assumptions, and this can be enough to trigger such a spiritual emergence process. Of course, in many cases it doesn't, and we just have to cope. For other people, it is sometimes the impact of experiencing, for the first time, something

like grinding poverty. Many missionaries did not get their true conversion until well into their tour of duty in another continent. The different smells, climate, food, mores, and customs are all a shock to our systems – often a much greater one than we realise. Sometimes something in this new medley of impressions then gets through to us, and our spiritual emergence process starts.

- **Burn-out:** This is the latest addition to the list, even though it has been implicit for a long time. There is a new book out by Dina Glouberman, a psychotherapist and founder of the Skyros Centre, called *The Joy of Burnout*, where she writes that often we ignore our ‘soul-whispering’ against an unhealthy job or relationship. “*Your heart has gone out of something but fear, often of the loss of your sense of identity, drives you to work even harder or give even more.*” Recently surveys by the UN International Labour Organisation in Britain, the US, Germany, Finland and Poland discovered that workplace stress, burnout and depression “are spiraling out of control” and affecting, on average, one in every ten workers. In the UK, it is three out of ten employees that suffer mental health problems. And 100 million workdays are lost each year due to stress, at a cost of £5.3 billion.

Burn-out is often not publicly or socially acknowledged because of the various associations with a mental breakdown. Society also seems to encourage this form of process by (almost deliberately) not educating people in simple stress reduction techniques: the Protestant work ethic reigns supreme! This sort of crisis situation that arises here can become a transcendent opportunity to break out into a different pattern of work, or of newly creative work, or through into a different way of being.

- **Other crisis events:** For many others, there were experiences in the most extreme of situations; in concentration camps; when facing death on a mountain; during war time; in a shipwreck, a car accident, an earthquake; or some such similar event, where they have a direct religious or spiritual experience: it becomes an apotheosis. The fear of death goes. They experience, at that moment, often a deep sense of peace. There is often a sense of contact with ‘something much bigger than themselves’. They are uplifted and transformed by this experience. They now know or have had direct experience that there is something “other” than themselves. The horror or danger around them is then viewed totally differently. Their future life is also often changed radically. By all accounts, they are more calmer, less angry, and more open, at least. They may also do more good deeds, kind work, and showing a dedication and caring for others. These types of events should be included as well in the list of Spiritual Emergency symptoms, I believe.

- **Normality:**

Finally, as mentioned before, there are the hundreds of thousands of people who evolve naturally and easily through their own life experiences, the joys and the sorrows of normal existence, and develop a deep and lasting spirituality. Sometimes this is within their established religion and culture, and sometimes they gently change it, or move into a new society, or marry into a new culture and find themselves that way. There are perhaps no epiphanies, no visions, no psychotic episodes, no dramatic changes. These people vastly outweigh the ones we are writing about, but they don’t talk about this much; it has been natural for them. They go to church; they pray; they help others; they give to charity; they contribute in many unseen ways to the betterment of their society. They lead a truly natural spiritual life.

ADDENDA:

As mentioned, there can be a succession of these events or symptoms, leading up to a crisis, or a synthesis of a number of these different forms all in one package.

Example 1: I worked with one person who just did not understand what was happening to them, and was somewhat hyper-manic as a result and as part of their process. At one point I gave them a copy of Emma Bragdon's book, *The Call to Spiritual Emergency* (see booklist). Then they said, "*Oh, so that is what is happening to me. I have this symptom, and this one, and some of that one. Now I know more of what is happening, I can cope.*" Their crisis was essentially over with their expanded understanding and they were then back 'in control'. We had taken them to go to a doctor to get some mild sleeping tablets to overcome their lack of sleep and curb the hyper-activity they had been going through. Thereafter they were fine, we started the integration work, and they caught their plane back home on schedule. When that person got home, over the next 18 months, they wrote nine small handbooks for people in such crisis situations.

Example 2: Another person phoned up a Spiritual Emergency Network help-line (in the USA) and asked, "*Can you help me. God came and sat in my head last Christmas.*" When asked what she meant by this, she said, "*Oh, I just know what people are thinking about when they come close to me. But my pastor says, 'I am of the Devil'; my women's group think I am a witch; and my husband does not want to know about any of this stuff.*" She was essentially O.K. within herself with the symptoms of her Spiritual Emergence process in that she had experienced "God sitting in her head" and the extra-sensory perception and these did not frighten her, but she was having a 'Spiritual Emergency' because the people around her were uncomfortable with it - so whose crisis was it?

The Surrounding Environment:

Therefore the environment around the person having a Spiritual Emergency is very, very important.

There is an archetypal story of a psychiatric patient coming out of an asylum who happens to see a guru, sitting naked under a tree with lots of people listening to him. He asks the guru, "*What are you doing that is different? When I did that, they locked me up in there.*" The guru said, "*It all depends on who you talk to?*"

David Lukoff (see Appendix) says: "*Not talking to anyone can drive you crazy.*" So it is a matter of finding the right people to talk to, or being in the right place, at the right time, in order to have your Spiritual Emergence process successfully. All this forms part of the surrounding environment.

I first met Grof & Mindell (see Reading List) at a conference in Monterey, CA in 1990 on "Spiritual Emergencies" where they, or Grof particularly, was promoting the formation of a crisis centre, a special place – like Esalen perhaps - where you could go to have your Spiritual Emergency. I surprised myself by disagreeing with him/them, feeling from my own experience, based on the Findhorn Foundation community, that it is actually better to create or re-educate the people around the person in crisis, their personal 'community', rather than removing them from their friends and family, in order to have their crisis properly. And then they have to

re-integrate themselves (hopefully the “New Self”) back into their original ‘community’.

Like everything else, there is not a right way or a wrong way. Both have their valid moments and I have mentioned this before and also recommended a “Zen” space for people earlier on. Many times alcoholics or addicts need go to the de-tox. centre or rehab. unit in order to:

- (i) go through their crisis of withdrawal, with its special medical components, and also
- (ii) go through the necessary process of education and re-education.

Leaving the safety of that sort of space and coming back into their community often brings on a secondary crisis. Sometimes ‘crisis centres’ can be used a little bit like dustbins, especially if the crisis is not handled properly and their family and friends are not integrated into the process. Therefore I, as a single private practitioner without the access to or resources of such a crisis centre, tend to want to work really hard with the person’s family and friends in order to help to change the environment around that person in a Spiritual Emergency, or to help to create a supportive community around the person in crisis, before I would even consider removing them to a different location.

Notes on Forming a Crisis Group follow later.

CRISIS AS SEEN IN TRANSFORMATIONAL TERMS

A friend of mine said to me once that often if someone in crisis can really open their eyes, there is always help just there, ready & waiting, which is actually perfect for them. This is nearly always true. However this perspective involves a level of trust in the "reality" of a crisis being a real and significant part of a person's transformational process, or part of a "Greater Plan", or perhaps a new step in their "Path," or whatever.

Often it seems differently. I have absolutely no wish whatsoever myself (and I deplore those who do) to try to stick a label of "this is just a difficulty in your personal Path of Transformation" onto someone: e.g. whose child has just died or who is experiencing a lot of pain or fear. One client of mine came into therapy after being, and because of being, 'busted' for drugs and a rejection of these drugs eventually brought about a significant change of life-style, for him, his wife, and his child.

It is not just a matter of re-framing the crisis perspective from something negative towards something more positive. It involves a gradual change towards a whole new set of beliefs - which, if it is to be effective, has to be based more on actual experience and not just on 'nice' New Age or Zen thought forms or affirmations - however actually true or useful they may be. It is insulting to the person otherwise, especially if they are in crisis to put out these thought forms or believe systems, however strongly you may believe in them yourself, if they are not ready for them. However your belief can be helpful too. The fact that you believe may be very helpful, if not essential, but timing is also very important, and that is why I have left out most of these here and put them into the second handbook, which deals more with the recovery period.

You must also allow the person to become different, to transform (if that is what they are doing), at their own pace and in their own direction. You must recognize their pain and crisis (which has to be worked through) and by so doing, perhaps help them to recognize it and fully experience it, and thus to find and re-formulate their own belief systems if they are to transform this experience. Often new belief systems are used as an escape from some of these more painful issues. The fact that or belief that "God Is Love", can help when working through the deep pain and issues of abandonment when a marriage breaks down: but it should not be used to avoid working through these issues.

Traditional priests and ministers are quite well trained in maintaining this sort of differentiation and helping people through. Psychotherapy and counseling is also the "new religion" and psychotherapists are usually sufficiently well trained as well. Psychologists, counselors, and life coaches are sometimes not quite so well trained in helping people with their deep emotions and persisting with them in working all aspects of them through.

SPIRITUAL TECHNOLOGIES AND TOOLKITS

If you can imagine having the most wonderful super-duper screwdriver with all the fancy bits and bobs, which is able to undo every possible type of screw, but what you are actually faced with is a recalcitrant 8mm hexagonal nut, then you have problems, if that is all you have. Similarly, the most comprehensive spanner set, with different sizes of spanners, sockets and ratchet handles, is useless when dealing with different sizes and types of screws. In these processes, we need a reasonably versatile spiritual toolkit and we also need to understand some of the technologies of the transformational process. Most of the "tools" and "technologies" fall into number of simple categories or precepts:

Feel the experience: - Most of us have developed or learnt very good strategies to avoid feelings, especially painful ones, but also sometimes intimate ones, powerful ones, aggressive ones etc. Nothing can really happen in your transformational process unless you allow your feelings - whatever they are - to emerge. Then they can be looked at, worked with, and possibly changed. But they have to come out first. So, please, allow yourself to feel. Having done so, as fully as possible, there is often an element of grace or change that comes afterwards. This can be seen as the transformational gift: but it can't be searched for. There are also some strong connections here with some Reichian Bodywork concepts, and some psychotherapeutic help may be helpful initially. But, "feeling the experience" is also a moment-to-moment process as well, and you have to learn how to do it for yourself.

Trust that there is help - Sometimes one feels terribly alone. A friend of mine said to me once that often if someone in crisis can really open their eyes, there is always help just there, ready & waiting, which is actually perfect for them. This is sometimes true. However this perspective or belief system involves a level of trust in the "reality" of a crisis being part of a person's transformational process, or a "Greater Plan", or a new step in their "Path", or whatever. Often it seems very differently: our life is in a mess and it seems as if there is no one who cares or understands. Don't trust that thought! Ask for help.

You're sometimes better off not alone: - In the growth movement we have had the value of having someone else there - sometimes just to witness - sometimes to facilitate, especially in cases of emotional expression and especially those emotions that we have difficulty with. Sometimes we even need to do it in groups, as the range and quality of people's experience is multiplied and thus increasingly validating. You also get wider perspectives.

You are sometimes better off alone: - A "Zen" space in order to go through some of these issues by yourself has already been mentioned. Sometimes, and initially, this can be difficult; but the more that you can manage to do it, the more attractive it can become. However this might not be your path. You may need a "community" around you, or need to create a "community" around you for you to go through your 'stuff' or develop your process. Both of these can also change and be more appropriate for you at different times.

Cry if you can - The strangest thing about crying (perhaps this is a carry-over from infancy) is that we can often never cry wholeheartedly without a listener - or at least a potential listener. We don't let ourselves cry as desperately as we might.

Maybe we are afraid to sink under the surface of the tears for fear that there will be no one to save us. Or maybe tears are a form of communication - like speech - and require a listener. There is a lovely moment in a film, *Three Colours Blue* with Juliette Binoche, where someone is crying and she asks, "Why?" The answer was "Because you are not." Crying is sometimes necessary.

Stay flexible - You are dealing with a dynamic situation, which can change in a moment in directions that you cannot imagine. If you are to be any use at all to yourself or another person, it will mean staying very flexible, being able to change as the person's process changes, and yet also maintain an underlying level of consistency. Practice this with your own process before you practice it on others. Good luck!

Develop an overview - This follows on from the last comment. The type of transformative process people go through is often very confusing and frightening. They can easily get lost in it, hence the crisis. Your job, as a supporter or family member, is to help them also have an overview - almost a view of the process itself. What is it that is changing? This understanding is also somewhat instinctual and partially archetypal; you need to develop a sense of the core of the process. In some ways it is quite visceral, almost an underview, not a mind view or a head-trip.

Just be in the moment - Again most of us are looking back to the past, or looking forward at future possibilities, or just thinking of something else. The more one can "be in the moment" and "feel the experience" the richer and fuller life becomes. You also stop punishing yourself for what has happened, or not happened, in the past and setting up expectations of the future which have little bearing on reality (when it happens) and can thus cause disappointments. This is approaching something of a Buddhist or Zen perspective.

Discover the lesson - Be aware of the process and try to extrapolate as to what the lesson is because the sooner you get to learn it, the less painful everything becomes and then you can start to reap the benefits as you go onto the next lesson. Sometimes the lesson is to learn to stop doing something - like hitting your head against a brick wall & hurting yourself. You have to feel the pain of that before you will learn to stop. This maxim should only really be applied to situations that re-occur. We can get into a lot of masochistic introspection otherwise.

There are No Short-cuts. That is it! "Life is Difficult." "There Ain't No Such Thing As A Free Lunch" either. "Nothing Good Ever Comes Easy". "No Gain Without Pain". "Magic Wands Only Exist in Fairy Stories." "Do the Time." Whatever!

Some experiences have no obvious lesson - I have absolutely no wish whatsoever to try to stick a label of, "This is just a difficulty in your personal Path of Transformation" onto someone (say) whose child has just died. (and I would deplore anyone who would do so).. Some experiences may eventually turn out to be a Spiritual Emergency, but any premature 'diagnosis' can be insensitive to the point of crassness. Similarly someone may be genuinely mentally ill and experiencing the horrors of a schizophrenic episode.

The picture is probably wider or deeper than you think – We, as therapists over the last few years, have all had to include the realistic possibility of child sexual abuse and incest in a client's history, as it is considerably more prevalent than anyone previously thought. As therapists particularly, therefore, we may have had to adapt from our original views and training perspectives and, as we listen to client's stories, allow our awareness to be triggered by certain stimuli which may indicate a deeper story.

Similarly with increasing evidence and acceptability of (say) psychosomatic connections, the power of breath work, traumas locked up somatically in the body, birth & pre-birth experiences, near-death experiences, psychic experiences, and past-life events we have to consider whether these need to be included in our tool-kit. How these can influence present continuums? As we grow, can we expand our consciousness to include these as possibilities?

Go Higher: Go Deeper:

Sometimes the problem is that the real issue is not being dealt with properly: it may be more fundamental than you think; or it may be more archetypal than you think. What is the real truth? Keep asking yourself this question. Go as deep as you can. What is the greatest goal, the highest good? Keep asking. You'll get there.

Go With the Process - if you are swimming in a river or the sea, and therefore very wet and tired of swimming, but you can't for the moment get out of that situation, then it is easier to swim with the current rather than against it (trying to get back where you came from). You are just as wet either way. Accept the process of change. Accept where you are, now. Work from these places, rather than trying to get back to where you were, and then try to make things better from there. There are lots more examples of this principle.

The Symptoms are NOT the Process. They may be indicative of the process, the may be irrelevant to the process, they may hinder the process. Don't get hooked into what is called "symptomatology". Some people (less understanding of their process) latch onto the symptoms – "What else is there?" The symptoms may be indicative of the process, but they are not the process.⁹

Many attempts are often made to "read meaning" into a person's symptoms.

"Because the car that I was in crashed on the way to the church wedding, it meant that I should not get married." This is a very seductive rationale. It may lead one to realising one's ambivalence about the proposed wedding. But the symptom (of the car crash) is not indicative of the process - because someone else might have got out, left the car, hitched a lift and made it to the church on time. It is the process, what you do with it, that is important.

One might just have easily used a frown on someone's face in the church to "realise" the latent ambivalence. The two events are phenomenologically unconnected. Whereas the person who develops psychic powers as part of their spiritual awakening and transformational process may be caught by the glamour of the powers and take up a "mind-reading" act in show-business and this could

⁹ : Example: Sometimes an anorexic is scared of her developing womanhood. It is unsafe for her to be a sexual object or person. If she doesn't eat, then she won't develop breasts and hips that define her as sexual. Her periods may even stop. Here the symptoms (anorexia – not eating) are indicative of the process (fear of sexuality).

hinder their transformational process, rather than (say) developing these gifts as a tool of intuitive medical diagnosis which could help a lot of people and lead one to need to understand more and more, in order to help people better. You choose the path you walk: ensure it is the right one.

Enjoy the Process. Using the image of the Transformational Process as a journey, and where the purpose of the process is the journey itself - then you might as well enjoy it, rather than hating it. Maybe you can even find ways of celebrating it. There is no benefit to anyone for us living a frightened or a miserable life. There are many marvels out there: and you just need to look for them as you walk along the road. Don't forget to involve your body. Eat, drink and really savour what you eat and drink. Enjoy movement, music, dance, exercise, - whatever it is that your body is telling you that you need. Seize the moment and live as fully as you can. Not doing something now, because of whatever rationale that exists in the back of your brain, may not help you later.

Regression is sometimes necessary, but don't over do it - Psychological states where the person is essentially regressed to a younger or simpler state can have a lot of healing potential, but the choice to go into them **has** to be a totally free one. If regression is spontaneous and chaotic, that does not necessarily help the process. Sometimes regression is over-used by some forms of therapies (e.g. Rebirthing), possibly because it is dramatic and effective, and more grounded work involving long periods of working with minute detail and gentle integration is then needed to counterbalance the dramatic breakthroughs sometimes achieved under regression. One must learn to manage the process, as well as go with it and not to get flooded by it.

It's really hard to go back, and looking back doesn't help very much.

Once all the stuff is out of Pandora's box, it is very hard to put things back. If other people are involved, or significant time has passed, it may not be so possible. It may still be just possible (like anything is) but it would take an amazing amount of hard work, and it may even not be very productive. After all, having done so much and gone so far, is it really worth trying to undo everything done already? However it is still a legitimate choice, as well. Looking back all the time can also be very counter productive. It may be that one needs to grieve for what one has left behind, in order to leave it behind and move on. Beware pillars of salt!

Do you really want to change? – This is a legitimate question related to the last point. However, the question ideally should have been asked much earlier in a person's process. This is a "life choice" point, and there is a legitimate question that must be put. "Do you really want to change?" I feel a therapist is ethically obliged to say, "Therapy can change your life. It can possibly help you to realize that your job is boring; your partner incompatible; you need a change in life style; or to go to India for a long while etc. This may have emerged out of the therapy and is material that you have been suppressing. Realizing this stuff is the process of change. It is difficult after this point to go back. It's like a point of "no-return". "Do you really want to open this can of worms up?" Also, "Do I really want to change – this way?" or "Now?" or "This part of my self?"

Stay Grounded - Whilst flights of fancy or fantasy, wonderful new experiences, all tinged with gold, are marvelous and maybe even necessary to the freeing of the

spirit and the creativity of the soul, nothing ultimately makes any sense or can happen with this marvelous stuff unless or until you are grounded as well. You are useless to yourself and to others if you stay on Cloud 17. You will need to bring it all back down to earth and use it there. Become human and mundane again, **without** losing this stuff - which is quite hard to do - and then the journey will be truly worthwhile.

Grieving is difficult - Our society doesn't know how to grieve well. An Irish wake, or something similar, allows one to let out all the emotion; the tearing of clothes, sackcloth and ashes, weeping and wailing, and then getting gloriously drunk and telling and hearing all the reminiscences from all the departed person's family and friends. Alternatively create an appropriate ceremony for yourself; weave into it all the bits and pieces that will make you feel better about letting this person, or thing, go and getting on with your new life.

There is no "right way": We so often get caught up in issues of right & wrong. There is no right way, or not "one" right way. There is the way that you are doing things now and it may be right for you, and it may also not be right for those around you, at this moment in time. If you realize that this is so, then change it. It is a judgment-call. Alternatively, you may not like the effects of this at present: ("It doesn't feel "right."), but you have agreed to try it this way, for the moment, because others feel that this might be better for you, and them. If it doesn't pan out right, then change it. If it feels wrong, really wrong, then change it. It is your path, your life, and ultimately your choice.

"Both... and..." rather than "either... or...": It can be the case that something is both difficult and ecstatic. We so often get locked into "either... or..." situations: black & white; Yes or No; Right or Wrong. We get caught between two polarities, and (often) neither is right. The world is a much bigger and more complex place than this and there are many more than two possibilities or perspectives. Try out the difference. Take some time and hold both as true; and then step beyond them both into a different choice.

"Should's" and "ought's" are NOT very helpful: We are often trying to change some of the precepts, rules and parameters that we have been brought up with. These thought forms tend to reinforce them. Try "can" or "may" instead. "You should stay together for the sake of the children," is a lot narrower and more judgmental than, "You can try to stay together for the sake of the children."

Primary? or Secondary?

Another "caveat" is to make sure of the distinction between the primary issue and the secondary ones. Often the "crisis" appears only around the disturbances generated by secondary issues. It may be "acceptable" to change one's profession, but to create a situation where one is sacked, or in a way in which you cannot continue (eg: a psychotic episode), is the way which creates the crisis. This is more "secondary."

It is these secondary processes that need "relief" and it is also these secondary processes (the 'symptoms') that are often treated by therapists or psychiatry. Once they are relieved then some of the primary issues (the desire to change) can be looked at more clearly, as long as they are not forgotten and ignored. The relief of the secondary process is often generated by an appropriate intervention. This does not cure the problem, but it may address the primary

process. If the primary issues are exposed and faced, the secondary "crisis" can disappear, and the basic problem can then be resolved without another crisis.

Develop Healthy Discrimination: Part of the mature spiritual person's tool-kit is a better sense of discrimination or discernment. "Is this right for me?" - is a question that becomes more and more automatic the further you go along the path. "Is this right for me, now?" - is another. The more you ask yourself this type of question, and the more you listen inside of yourself for the answer, the more automatic it will become and the more refined your discrimination will be, and you can extend this and refine this endlessly. It can develop into a sense of something like intuition.

Look After Your Body: As mentioned occasionally, your body is very important. Crisis, fear, shock and stress can blow your immune system to shreds; medications can be quite toxic as can be the by-products of stress itself. Make sure that you: **(i)** drink at least two litres of water a day; **(ii)** eat healthily and variedly, using as fresh, well-cooked and healthy food as possible; **(iii)** get some aerobic exercise at least 3 times a week, so that you get sweaty for at least 20-30 mins; **(iv)** try some progressive relaxation techniques, or a meditational tape, or listening to gentle music, or repeating a mantra, whilst lying down, for at least 20 minutes (ideally twice) a day. All of these are pretty essential, if not mandatory.

No Expectations: These can really screw you up; and you can also set yourself up for a major series of disappointments. Whether this is a more of a "technology" or a "spiritual principle" (see later) doesn't really matter much, they can still screw you up and distort your perception of the here-and-now..

A Sense of Humour: is another essential tool in our toolkit, or a technology to have. Many of the 'great' and 'good' who work in this field have an excellent sense of humour: Ram Dass; Patch Adams; Caroline Myss; to name a few. Their "sacred irreverence" is very encouraging, and very lightening.

Celebrate and utilize the "duvet day": Sometimes we really need one, or two, or even a few extra "duvet" moments. Following your inner voice, and kicking the Protestant work-ethic out of the window, can sometimes be such a relief, a liberation, and such sheer pleasure that this also has to be included into our tool-kit.

What Works For You is just what works for you. If it doesn't work for you, change it. You do not have to explain anything, justify this, or wonder about it endlessly. It either works for you, or it doesn't. Pragmatism reigns supreme.

MADNESS SEEN DIFFERENTLY

Crisis or process:

There has been continual talk of the client's or the person in crisis' process. There have also been two basic views put forward:

- (a) that the crisis is essentially a break-down of that person's coping strategies and what is necessary is to re-build new and better ones and to gain an understanding of what has happened; and
- (b) that the crisis offers a new potential - a break-through - to new possibilities, possibly previously unimagined.

The first is much less open-ended; is more within mainstream thought and psychological theories (cognitive behavioural or psychodynamic); it is better grounded and more pragmatic; it is easier to conceptualise; it views the person more as a patient, or victim of events; it is framed in ending the crisis as soon as possible - though not necessarily by reverting to the pre-crisis situation; it is more socially orientated.

".... the salient features of crisis intervention. It is immediate. It is brief. It includes a number of people, not just a single individual. It involves a mixture of practical and interpretive help, and it can stimulate creative developments in the life of a person or family, as well as alleviate distress."

from Joseph H. Berke, "Butterfly Man"

The second view is much more open-ended in that the crisis *is an actual part* of the person's process; is more controversial or debatable; is more from within the fields of humanistic and transpersonal psychology; is much more client-orientated; is much more uncertain as the outcome is not known, nor is the duration - though there are often practical limits set to this; and the crisis doesn't end, but metamorphoses into a transition, transformation, evolution, break-through, or whatever and the eventual integration of that; is much more demanding and difficult; and involves several paradigm shifts for the helpers and professionals.

These views are thus not totally mutually exclusive.

Caplan & Lindemann (pioneers of Crisis Intervention) argued that the best way to intervene is not by treating the symptoms of the tensions produced, but by helping the person or the family to confront and work through the crisis itself. An added bonus is that the crisis can create an emergency state in which one's ability to learn and re-adapt is greater than usual. The ability to get through the crisis depends upon how realistically the person perceives the situation; the degree of interpersonal support the person has; and the depth of their experience of personal resources. The tasks of those who intervene include assisting the person and-or family to achieve an undistorted view of what's happening, mobilizing supporting relationships and acting as an auxiliary ego until the person is more able to cope. There are dangers in all these of the practitioner/ therapist/ helper "taking over" the process and imposing their own views.

The Seduction of Madness is a title of a book by Dr Edward M. Podvoll which is about psychosis, & recovery, and especially recovery at home. He considers that psychosis may be one of the unfortunate permutations of the human condition, rather than a rare disease. The medicalisation of insanity almost means or even requires that the treatment must therefore be medical and the medical profession is still very confused about treatment & cure.

Podvoll states that "*the overuse of medications is commonplace, and along with that has come the health-consuming battle against their enfeebling side effects...* (in which he includes poor concentration, lack of interest & boredom) *Electro-convulsive therapy has become fashionable to a degree that some major teaching hospitals (in the USA) are delivering it as the primary treatment for severe neurotic depressions. It is now used on over 30,000 patients a year. And there is a renewed interest in the use of psychosurgery based almost exclusively on the argument of cost-effectiveness. The outrageous predictions of Ivan Illich in Medical Nemesis: The Expropriation of Health have already come true.*"

The profession of medicine and psychotherapy (especially in the USA, but increasingly in the UK) is primarily bound up with issues of cost-effectiveness, insurance regulations and fear of malpractice allegations. These issues have nothing to do with the patient or his or her condition: but they dominate the treatment. They also ... "*promote a fear of the intimate relationships that are so precious and vital to the recovery from madness.*" Training – except in physical medicine - is grossly neglected, in his opinion, and there is a continual stream of indictments against inattention, neglect & violation. Everything seems to be centred towards looking for a biological cure: a quick fix. He advocates much more motivation towards an alternative, more natural & homelike treatment – which is more traditionally based. Bleuler lived with his psychotic patients in an experimental healing community for 12 years; William James, & Bruno Bettelheim also advocated similar approaches to mental healing; Patch Adams does it or did it as well.

Podvoll speaks a lot about the bewitchment & seduction of the person's psychotic symptoms and the effort & discipline required to overcome these symptoms in order to recover fully. And, from the therapists' perspective, much of the effort includes really listening to the patients. They tend to tell that *whatever the trigger to that (psychotic) state may be, the experience must still be related to at its subtle stirrings, during the midst of psychological anarchy, and during the fragile process of awakening. One must work directly and precisely with ongoing and seemingly bizarre mental & physical events. Failure to do so drives one deeper into madness.*

He doesn't advocate "going with the flow" as so many New Age therapists and people in spiritual emergencies seem to want to do. He advocates a lot of hard work, resisting obvious symptoms of madness, however attractive they may seem to the individual concerned, AND treating that person with kindness, respect and ultimate humanity. Podvoll is primarily looking at recovery, rather than reform (which is why I have included this synopsis in this handbook) and he concentrates on "*perceiving and nurturing islands of clarity (moments of natural recovery), for in this way full recovery from psychosis has been accomplished and will continue to occur without aggressive or physically intrusive methods of treatment.*"

In the introduction he quotes Dr Manfred Bleuler, son of Eugen Bleuler (who founded the concept of schizophrenia).

The need to become free from the prejudice that a person who has become insane will always be so, is extremely urgent and you (Podvell) are formulating it

very well. I have been much attacked within the last years as I have seen and described the recovery of many schizophrenics who had been severely sick for long periods. The critic of my teaching and my experience consist in the following opinion: 'A schizophrenic patient can never recover - if you imagine to have seen recoveries of schizophrenic patients the reason is: you have made a wrong diagnosis'. (This comment was made to the son of the man who categorised schizophrenia and is continuing his father's work at Burghölzli in Zurich.) In my opinion this criticism is unrealistic & harmful to our patients.

Attitudes to medication:

It is worth noting that the most common or traditional psychiatric approach involves generally using psychotropic medications to control and resolve the extreme parts of the crisis. These can be very damaging: physically & emotionally. Sometimes they are absolutely necessary, however, so involving doctors can also be a double-edged sword.

There is little respect in traditional psychiatric treatment for the person's process and their more subtle feelings. There is now an increasing awareness of their rights as a person, but the parameters of "getting someone over their crisis" can be disrespectful in themselves. Sometimes there is often panic (instead of calm) at their secondary symptoms. Sometimes medication is taken by, or is given to, patients, as much to make the staff and the carers feel better, or make their life easier, as to help the patient recover.

A very effective approach is often to stay calm, and don't become impatient, frightened or critical. The person in crisis may, or will, then trust you with their process and a joint working together towards a cure becomes possible. Stay cool also with the professionals who may have a different viewpoint. One good thing is that often they want to discharge this person as soon as it is 'safe' to do so (in their terms). Play along with this and they will bless you.

The medical or pharmaceutical approach can be extremely useful for very short-term interventions, in an emergency situation, and/or combined with other techniques to help understanding and integration. More enlightened psychiatrists are trying to limit such usage towards a reasonably rapid (often within a few days or a maximum of 3 weeks) return to normal life - though the medications are usually (unfortunately) maintained for a considerable while longer. An example of this is the euphemism, "Keep taking the tablets."

Medication can be quite successful for the long-term management of full-blown chronic psychoses, where other attempts have failed and (quite likely) some pathology has occurred. It must be also viewed from another perspective, as some psychotropic medications can be extremely abusive to the patient. Many, many patients report other ailments or side-effects that would not be tolerated in medications taken for any other condition (e.g. birth control tablets) or "illnesses" other than mental illness.

"Madness" treated without medication

There have been a number of very successful psychotherapeutic treatments or approaches with people who have been diagnosed as chronically psychotic, which have been used to help the person in crisis to get off their medications, and have also seemingly helped to resolve their crisis. This is sometimes where the medication had seemed to hold or freeze the person's situation or process in a manageable, but often quite unpleasant, condition.

A tricky course has to be negotiated between these alternatives – Scylla and Charybdis, always bearing in mind (hopefully) the best interests of the client,

rather than what is common practice within the system.

The client (or patient) or person in crisis, also has a totally valid perspective of their own which **must** be tapped wherever and whenever possible. After all, it is they who are going to have to live with the effects of this treatment. If ideas are 'deliberately' floated, the client will give their input. Social Work and some hospital systems now often give clients the **right** to have an advocate present to speak for them and put their perspective forward in any type of "case conference".

Families in crisis:

One perspective also worth noting is that, in many cases, the "person in crisis" is more correctly the person in the family who is least able to cope with the family crisis – i.e. the crisis is actually happening in the family, and is not really based within the individual's process. This perspective is central to much of Family Psychotherapy, and the whole family gets treated, rather than just the identified "patient" or person in crisis.

For these reasons, the Arbours Association (for example) finds home visits very informative, if not essential in the treatment of people in crisis. R.D. Scott postulates "identity warfare" to describe the situation whereby some people become so threatening to the psychic survival of others in the family (or community) that their continued presence in the group serves as an incitement to fantasized, if not actual, murder and mayhem. The person in crisis, or having a spiritual emergence process, therefore is seen as a threat to the insecure family dynamic.

Hospitalisation or the identification of someone as "mentally ill" is the means by which the most threatening person (or the one with the least power) can be 'sacrificed' so that the rest of the group remains intact. This Scott calls "cultural closure" as that person is then no longer seen as a 'proper' member of the group.

Network Intervention:

Sometimes the resources of the social or family group can be utilised to help the person in crisis and this type of intervention is known as a "network intervention" or "network therapy". Networks are created with the involvement of the person in crisis to stay with the person, do the household chores, look after the kids, help out at work etc. This "crisis networking" helps overcome the acts of omission or commission that the malfunctioning unit (which contains the person in crisis) has been allowing to perpetuate and often provoke the crisis. The social network is often non-familial, and much wider than the family, including neighbours, schools, office, church, and other activity-based groups, and yet contains all the family members. The extended family is more a family by choice. The "Crisis Group" structure can be easily applied to this sort of network.

"Break-through", rather than "break-down":

Another word on the "break-through" approach. Whilst this is beset with difficulties and challenges (and not just for the person in crisis), it is the approach that offers the most favourable opportunity for the person in crisis, if it can be undertaken safely. "Going for gold," was an expression from one TV quiz game and this approach can be seen in such a way. But this choice is also beset with dangers.

It can be filled with phenomenal growth, insight, spirit, grace and beauty. It can also have, as constituent elements: all the horrors of their own personal hell for the person in the crisis; possibly deeply shocking revelations for their family

and friends; and extreme fatigue, provocation and challenges for the helpers involved. It should not be undertaken lightly, nor with stars in one's eyes: nor with the assumption that everything will naturally be all right because you are doing spiritual work; that is an extreme and pernicious form of spiritual arrogance.

In his book, *Iron John*, Robert Bly draws the connection between the "golden ball" that attracts the youth, the "golden" coated finger of the "transformational wound" and the "golden hair" that eventually, after wandering in the wilderness, attracts the Princess. The transformational process is "going for gold", but what is it that is getting in the way of the person's natural spiritual evolutionary process, and therefore sometimes it is the obstructions which need to be transformed?

The boy got hurt; had to lie and steal from his parents; had to go into exile; wandered in the woods with a very scary companion; fail at a test; got rejected and had to back out into the wilderness; had to accept a menial position; had to accept bullying, discrimination and reject; had to fight three battles; got seriously wounded; and then eventually, by chance or otherwise, "got to the gold" in this instance the princess and half a kingdom. The path may be relatively simple, but it is NEVER easy.

However pragmatism only too often wins, and all too often this approach is too difficult for those concerned in real life. Neither is a spiritual community or somewhere like Samye Ling, or the Findhorn Foundation necessarily the answer for you, wherever you happen to be having your crisis. These places are not, repeat NOT, open therapeutic communities. They may be helping to serve the planet, in their own way, and they may have charitable aims, but they do this in their own way, on their particular path, and at their own choice. Some of the people who live and work there may be specially trained or qualified. But please, do NOT turn up on their doorsteps and say, "I am having a Spiritual Emergency. Please, help me!" They are as likely to reply, "Well, so am I – now!" In this instance, please help them by staying away and having your crisis in your own community. Any therapeutic contact – with anyone - must, repeat MUST, be very carefully and clearly negotiated.

The Soul's Code:

James Hillman talks about his "acorn" theory; where each person, each soul, has its unique 'code' which is its potential and there is a sort of morphogenetic impulse imbedded in the person (like the oak tree imbedded in the acorn) to develop along the lines of this code and gives them the basic motivation for their particular life development.

*"The soul of each of us is given a unique daimon before we are born, and it has selected an image or a pattern what we live on earth. This soul-companion, the daimon, guides us here; in the process of arrival, however we forget all that took place and believe we come empty into this world. The daimon remembers what is in your image and belongs to your pattern, and therefore your daimon is the carrier of your destiny."*¹⁰

The conflicts that can happen are often in our childhood (psychotherapy has got that bit right) but it is the conflict between our inbuilt nemesis and the environment around us. The call of our destiny can cause the tantrums & obstinacies, the hyper-activity, the sense of isolation, the depressions and loss of faith, that happen in our childhood and affect the rest of our lives.

¹⁰ Hillman, James: *The Soul's Code: In Search of Character and Calling* (Bantam): p.8

Like Pierro Ferrucci, Hillman examines the biographical aspects of the lives of exceptional people. Not only does Ferrucci find that many, if not all of these people have had spiritual crises, Hillman looks for instances where the Soul's Code breaks through and the person suddenly finds the motivation needed to overcome their initial environment, or makes the sudden change that comes from deep within themselves, and nowhere else.

Hillman also tries to explore the nature of evil, as does Scott Peck in his seminal work, *The People of the Lie*. Whereas Peck explains evil as compulsive narcissism, within the context of the Soul's Code, Hillman theorises that the person's daimon becomes a "Bad Seed" and turns them towards the path of evil. He outlines eight 'types' of evil, which might explain some of the psychopaths, the serial murderers, the heartless dictators and "natural born killers". It is an interesting theory, but not totally convincing. However it certainly gives us some alternative views on these forms of human madness.

So I would like to never lose sight of these different perspectives as distinct possibilities and I often try to consciously reinforce some of these possibilities - to the client or person in crisis - as a potential goal, if not for any immediate work with their crisis group or therapy practitioner, then certainly as a long-term possibility for him or herself and their growth. For if this is done, then all the trials and tribulations we go through in these situations can fit into this larger framework and can become worthwhile. One does not have to go "mad" in order to resolve a crisis. It *can* often be beautiful and graceful. It *is* part of your basic human potential; your uniqueness.

SOME SELF-HELP EXERCISES

These have been devised and collected from various sources. Please use them as indicated,

EXERCISE: - **to get rid of obsessive thoughts.** From the Tibetan "Bon" tradition. To do by oneself; or in a group all together.

Stand relaxed Tai Chi way - knees bent a little - back straight - sitting on air - head floating on neck.

Take very deep in-breath and hold.

During holding, very quickly brush down whole body - head, arms, torso, legs, - seven times.

Immediately shake arms and legs violently and shout "Do-Pack" on the out breath.

Freeze. Stand. Feel your body. Just be aware.

Obsessive thoughts will have been replaced with a "Zen space".

Repeat three times or as often as necessary.

EXERCISE: - from Process Oriented Psychotherapy - to be done in triads - each person to describe or be asked:

What would you/I be like if you/I went crazy?

What are your/my deepest, most fearsome, subconscious, secondary (denied) and crazy processes?

Can you see or imagine yourself going crazy ? (Take a few minutes and allow any images.)

Can you feel it ? (Take a few minutes and allow any emotions or proprioceptive (body-centred) feelings)

Now imagine yourself using some of that energy positively as a leader or facilitator? What would that look like? (Take a few minutes.)

Describe to the others in the triad how and where you might use that sort of energy in your life - at home, at work, in creativity etc. – and then act it out - how you would do that?

MEDITATION

THE BODY THAT BROUGHT ME HERE: LIFE CHANGES!

Get someone to read this out to you, with about 1 minute pauses at the end of each section.

How did your body respond to some of these life experiences that you might have had: if you did, you carry all of these changes in your body and these helped to shape your body, and your spirit.

Pregnancy & Birth: (Inter-uterine experiences; Caesarian-section, cord & birth traumas; post-natal isolation; your welcome into and your position in the family; early family atmosphere & feelings)

First Movement Memories: (of being in the womb; being held, rocked, carried, cuddled; of early boat, plane, train, ship journeys; of falling from a tree, or out of bed etc.)

Environment: the environments you grew up in: (fields; mountains; woods; by the sea; urban; suburbs; climate; friendly or hostile; safe or not; first impressions of school)

Trainings: (potty training; reading; riding a bike; swimming; horse riding; playing a musical instrument; dance/ballet; gymnastics and athletics; sports at school)

Messages: (sexist ones: boys “don’t cry”; girls “are pretty”; “you are ...” - clumsy, intelligent, etc; “a body is ...” - nice/nasty; what posture; safety; shame; racial; class; family fears; recurrent dreams or nightmares)

Sexuality: (nakedness; bathrooms; sensuality; what whispers of incest; what types of touch; film images; teenage images/role models; one’s 1st affair; experiences of sex; impotence/fertility)

Health: (being suckled; types of food; weight; strength; flexibility; illnesses; disability; eyesight; allergies; chronic issues; hospitalisations; operations)

Traumas & Accidents: (family deaths, car accidents, abuse, fractures, hospital operations, natural disasters; near misses; ecstatic experiences;)

Maturation: (the growth of and changes in your body; menârche; puberty & adolescence; childbirth; chronic illness; family predispositions; menopause; aging; nearing death; parts of your body ‘not working’ so well)

What is your Best Body Memory?

What is your Worst Body Memory?

What is your Best Experience of Spirit?

What is your Worst Experience of Spirit?

MEDITATION: THE CASTLE OF THE SPIRIT

Get someone to read this out to you.

Imagine you are walking through a forest or wood *[short pause]* and eventually you come to a body of water. This might be a lake or a wide river. *[short pause]* Across the water there is a wonderful castle - The Castle of the Soul. In your imagination, you make your way across the water *[short pause]*. There might be a bridge, or a boat, or you might have to make a raft, or even swim. Follow your own imagery. *[short pause]*

Once you are inside the Castle of the Soul, you climb a stairway to a large Hall. *[short pause]* Note the details; try to remember them for later. *[short pause]* This Hall is called 'The Hall of Mirrors' and all you can see are reflections of yourself. *[short pause]* Eventually you see there are four doors leading from it. One to the North, South, East, and one to the West.

The door to the North is the one that you must try first. It has a label on the door that says "Psychotic Madness". Please open the door and go into the room behind it. Stay in this room for a while and notice what images come to you. *[Long Pause]*

Now come out, back into the Hall of Mirrors, and close the door firmly behind you. Look at the reflections of yourself again. *[short pause]*

Now open the door to the South. It has a label on it that says, "Altered States of Consciousness". Please open the door and go into the room behind it. Stay in this room for a while and notice what images come to you. *[Long Pause]*

Now come out, back into the Hall of Mirrors, and close the door firmly behind you. Look at the reflections of yourself again. Have things changed a bit? *[short pause]*

Now open the door to the West. It has a label on it that says, "Spiritual Emergencies". Please open the door and go into the room behind it. Stay in this room for a while and notice what images come to you. *[Long Pause]*

Now come out, back into the Hall of Mirrors, and close the door firmly behind you. Look at the reflections of yourself again. *[short pause]*

Now open the door to the East. It has a label on it that says, "Enlightenment". Please open the door and go into the room behind it. Stay in this room for a while and notice what images come to you. *[Long Pause]*

Now come out, back into the Hall of Mirrors, and close the door firmly behind you. Look at the reflections of yourself again. *[short pause]*

Have things changed a bit? Or a lot? *[short pause]*

Please now imagine now that you are exiting the Hall, going down the stairs.

There, just as you are leaving the castle, there is a gift for you. You look at it, appreciate it, and you pick it up and take it with you.

Now you are going through the doors, out the gate, and leaving the Castle of the Soul - for the moment, at least. *[short pause]*

Now you know it is there, you can always find your way back again.

You are crossing the water again, and entering the forest. *[short pause]* You are now coming back into the room where you are now lying down, in your body, in this space and time, here and now. *[short pause]*

In your own time, open your eyes and remembering all that you have seen, please take some time now to make some notes, or write something of your experiences, or do some drawings, or make whatever form you wish to to record something of this experience. *[Allow ten to fifteen minutes perhaps]*

Then discuss however much of this that seems appropriate with the person who is nearest to you / or who read out this guided meditation for you.

EXERCISE : RE-BUILDING YOUR AURA (Auric Boundary)

This is very good for people who have been traumatised. They should be encouraged to do it about three times within 24 hours. The first time only they should do it with the therapist present. Be very careful of personal boundaries immediately after the person has done it.

The exercise goes like this:- Imagine that you are going to build a dome around yourself at arms length away from yourself; all around; up and over; down to the ground; like a glass dome over Victorian dolls or stuffed birds. You are going to do this from the inside, using your breath (prana) energy. You can put whatever qualities you would like into this energy field: colours, healing, peace, safety, sparkly bits, whatever.

Take a deep breath into your body expanding your chest area. Scoop the energy from your chest with your hand as if you are scooping up wet clay or paint. Paint this energy with your hand on the inside surface of the dome as you breathe out. Notice the area that you have 'painted'. Breathe in again and repeat the exercise.

Carry on doing this and extending the 'painted' area all the way around; up and over; and down to the ground. It will take at least 20 minutes. Maybe 40 minutes the first time, or if there is a lot of emotion. If there is emotion, feel it, allow it, breathe through it, let it flow and change.

Once you have completed the whole exercise; take some time to notice the difference - if any. Have you just been breathing and waving your arms around; or is there a qualitative difference in the way you now feel? What is this difference? Feel it and experience it;; don't try to describe it; there are often not good words: sometimes these things are beyond language.

Once you have a feeling for this energy field, please imagine that you can change it. You can make it like carbon 12-point steel so that nothing and no-one can get in; or a highly charged electric force field so that if someone tries to intrude, they'll get fried. You can make it like a glorious castle, or a sacred temple. You can make it obscure so that no-one can see you. Or you can make it dissolve and welcome in a loved one, or a child. If you don't like a rigid "dome", make it a more flexible membrane or envelope. You can give it extra qualities like healing, or peace; just by thinking about it. It is your energy, at your control. Just breathe in and it is solid, clear and present there; just breathe out and it expands or dissipates. Breathe in, and it is back.

For people who have been severely traumatised, shocked or abused, it is likely their 'auric' boundaries are very depleted or have holes in them. This exercise should be repeated regularly. It is difficult to work therapeutically with someone if they have no sense of themselves or a safe space for themselves. This exercise can provide that: a safe space for themselves, wherever they are. Try it out!

DYNAMIC MEDITATION

You might wish to speak this text onto a tape, with pauses, before you do the meditation, and then play it to yourself whilst you do the meditation. Or have someone else present reading it out slowly and witnessing your movement.

You may need a large clear space in order to do this. Wear loose comfortable clothing. Try doing it first by yourself. Someone else can also be present – witnessing what you do (which means watching uncritically). This meditation is adapted from Authentic Movement. Take 15-20 minutes for this.

Stand still or start sitting or lying down. Maybe, at first, keep your eyes closed.

Imagine that you have been dancing all your life, but you have always felt that you have never danced properly; you have felt that you haven't really known how; or it has always been to a different tune; or it hasn't felt that it has been *your* dance.

Now go inside. Deep inside of you there is a stirring.

Imagine that *your* dance, your movement, is there, deep inside you.

Imagine (if you want to) that someone ethereal is holding your hands and drawing that special dance of yours out of you. Or that it is stirring and rising.

Imagine that the time is now, and your real dance is beginning here and now. It is beginning to move you – from deep down inside of you.

It is a bit like puppetry in reverse. No strings - but there is a movement from within that is beginning to move out; beginning to move your arms and your legs, your head and torso.

You begin to move very gently: not to any thought, but from within.

You begin to realize, on a deep level, that *this* is your dance, and the only person who knows what it is, and how to move, is you, and, since it is *your* dance, thus whatever you do, however you move is now right – for you, right now.

Begin to move slowly. Move gently. Don't think about it. Just allow yourself to move from within.

Whatever you do, however you move, is now authentically you. You can move exactly how you want to. You can stop and you can go, as and when you want to. You can move in any way; up and down; on the floor; round and about; just as you want to. This is your dance, and you are now dancing it.

Allow yourself to just keep moving. It doesn't have to be a dance now. It is just movement, your movement.

EXERCISE: Death Fantasies and How They Stop You Living:

Work in pairs, with someone (i) who you feel comfortable with, but (ii) that you do not know very well (eg: not a life partner). Decide who is going to 'work' first. The other person will read the questions and keep to the time frame. Take at least twenty minutes for the exercise and then change over roles. Take about twenty minutes after each person has 'worked' to discuss the exercise.

1. What is one of the central problems areas of your life, that you would like to change, but you can't as you feel blocked in some way?
2. Describe this to your partner and then put it aside for a while.
3. How do you imagine you will die? Where will you be? How old will you be? Who will be there? What will you be doing?
4. What might happen at the exact moment of your death?
5. Notice your reactions (emotional, somatic, etc.) to your fantasy.
6. Allow yourself to build up on that fantasy. Use the exact details and the materia above and focus on the most salient aspect of your death.
7. Notice what it is to be like fully in that death state. Explore this as if it is a lucid dream. Expand the fantasy.
8. Now ask yourself what is death ultimately trying to bring to you. What can you benefit or learn from this death fantasy?
9. Which parts of your 'ordinary' personality would have to die if you were going to have this state of awareness? Who or what new part of you lives when this other part of you dies?
10. Be this part. Feel it in your body. Imagine living this way in the world.
11. Who or what, either within your or outside of you, seems to be against you being in this new state? "I'd rather die than ..." "S/he'd kill me if I was ..."
12. Can you use your death fantasy as an ally or as a pattern to deal with this 'edge figure' or this fear of retribution? Play out a scenario with your partner where you are the 'death state and your partner is the 'edge figure'.

When this is over, allow your partner to tell you the story of your death process. S/he will 'weave' all the elements above - including the original problem, the 'death state' and the 'edge figure' - into your death story. Be sure to include death as an ally in the story.

Adapted from a Process Oriented Psychology workshop with Robert Hall and Jan Dworkin. 200

DESCENDING INTO THE DARK

An Exercise: A Meditation

This is a form of a guided meditation. It is essentially for you to do for yourself, possibly even by yourself. Please allow yourself to experience and to express any emotions that you might feel as you are progressing through it. The free expression of emotions (cries, groans, tears, laughter, howls, or whatever) is an important aspect of this exercise. You may therefore need to create a 'safe space', do it when no-one is around, or put a "Do Not Disturb" sign on the door. It can also read "I am having a Spiritual Emergence experience."

The exercise should take at least 20 minutes minimum and it is probably best done lying on a mattress or squab, so that if you roll or thrash around, you won't get hurt. You might want to get someone to read this through and record it onto a tape, with pauses after each paragraph, and where indicated, if you want to do this totally by yourself. Otherwise it is good to do this exercise reciprocally with a friend; each taking a full half-hour or so for the exercise; then changing roles from reader to 'do-er'; and then discussing it all afterwards.

It beats watching most TV shows.

Descend into the dark by whatever means comes to your mind. A cave, an entrance to the underworld, a river suddenly running underground, a fall into a bottomless pit, the sudden loss of sunlight, or grace, whatever. This is a journey downwards, with no knowing that you will return. Many have gone: few, if any, have returned - unchanged that is. The general prognosis is not good. So go with some fear and dread.

Acknowledging mistakes that you have made. Spend a few moments and remember a few of the "large" mistakes that you have made: the ones where you really 'fucked up'. Of course, things worked out one way and another, eventually, but with these lulus - if you could go back and re-do your life - you would redo these ones. Take yourself, step by step, through the experience to the point of mistake. Don't try to avoid, forgive, or excuse. At best, let this be a real leaning experience. At worst, "*Mea culpa, mea culpa, mea maxima culpa.*" There is no "Sorry" here.

Acknowledge all pain and distress that you might have caused to any other people. Spend a while and go back through your life and acknowledge that you may (frequently) have caused others pain and distress. Allow yourself now to feel their pain. Walk in their shoes, feeling about you as they might have done. No time for hubris, here. Allow yourself to really feel their pain - about you.

Allow all your fears and demons to come, and to affect you, but not to deviate you too much from your purpose - to descend further. They will constantly be "at" you from now on. All sorts - every single one you have ever had - they are all here now; and they are all "at" you - in your face. You are big enough and strong enough, perhaps, to stare them out and carry on: maybe you have to wrestle with them and defeat them, just. The cumulative toll is enormous. You have lots of fears and demons: legions. They are all here now.

Make yourself one promise - "*If I get out of here, I will (at least) dox.....*" Make it a restitutive action, because, through proper action, we can be possibly be redeemed. This is the time to decide upon an actual action - a penance. Allow the

thought to come from within: this is not a 'should' or an 'ought to' situation, what others might determine: it is what you want to do, from deep within yourself, to make restitution, or some sort of amends, or to give some service - not necessarily connected to anyone or to any previous situation - but for the benefit of the world.

Now descend further into the dark. Lack of acknowledgement of any of this material will prevent you from progressing further on your path. Do you really want to stick here - forever ? Some people do. Take a few breaths and complete the things you thought about earlier, but didn't want to face. Then move on.

You encounter a major obstacle - a deep dark river; a chasm; a bottomless pit; a wall of rock; steel doors; a real "nasty" like a Balrog, or the Sphinx. There seems no way past. It's an impossible situation, and yet you cannot stay here - tormented as you are. You may fail, and that's it. There is a way through, round, over: a way of getting to beyond this obstacle - and you have to find it - Now! It will take every bit of your skill and ingenuity; every bit of courage; every resource - stuff you never thought that you had. You have to do it.

You get your 'wound' - your just desserts. In overcoming the major obstacle, you receive a wound. You get badly wounded, hurt, or damaged - in exactly the way that goes in the deepest and hurts the most. You suffer, uniquely for you. If you were proud of your athletic prowess; now you are lame. If you were admired for your beauty, you are now scarred. If you won prizes; now you've lost that potential, your edge. This is a real wound, the Real Wound, a Wound to the Soul - the one that is going to be with you forevermore. No quick fix and plastic surgery for this one. In some obscure ways, this is also why you took this road; this wounding was almost inevitable. Before you now realize you were naïve, or you were hiding your wounds. Your previous wounds were scratches. This is real. This is the price that you must pay for this journey, for anything really worthwhile. And yet there is still no guarantee of any gain - only pain. So you continue on, but now you are wounded.

You get lost - hopelessly lost. There is no path; no light; a maze; endless dark corridors. You are all turned around; no way to go; no way to get back. You have no water, no food, no light, and you are wounded. The despair and the inaction arising from this, from being lost here, now seems interminable; is interminable. There is no sense of time. If you collapse, you will die here. There may be reminders (bones) that you come across of others who have failed. So you carry on - somehow, wherever. You are lost, you are hurt, and you still have to carry on. But the spark of life in you is now fading.

A light glows faintly and grows as you move towards it. Hope arises; but fear arises also. You have no idea what this faint gleam is and yet it is something. Go towards it slowly, very slowly. It could be worse than what was before.

You are suddenly in the Presence of Something - This "something" is huge, vast and awesome. You don't know what it is. It is almost alien, or something other dimensional. You cannot fight it; run from it; hide from it; trick it; or escape it in any way. Its power is phenomenal and, at this moment, currently benign. It is not threatening; it is Absolute. You can only submit to it - completely, finally, ultimately. This is It. This is the End. This is what you have come for. There is nowhere else to go. You surrender.

You are now Judged. You are seen totally. This “Something” can look right through you, to your very soul. It sees everything there is about you to see; it knows everything about you to know. Everything that has ever happened to you - ever, this life, past lives, the lot - is seen, and known, and it is all, now, Judged. You see everything laid out: absolutely everything. You have no idea of the place, the space, the ways, the mores, the vision, or the perspective from which this judgment comes. Its parameters are nothing like yours, or anyone else’s. This “Something” is almost alien in its removed-ness from your life; except that “It” is so knowing, so familiar, so intimate with every detail of your life, and with you, that it is not alien. And so you are now Judged.

Long Pause

You receive the Judgment. It was total, complete, exact, absolute, terrible, and it was also almost a relief. It was the Last Judgment. This is absolute and for all time. You will now take with you whatever you were ‘given’ by this Judge. Any rules or guidance that you were given, you must now obey implicitly. Any penance or task to perform, you must perform it completely. This Judgment lasts – for the rest of your life, and for all time. This is now part of You. You will wear this, or carry this now forever.

You begin the Return. After a long time, somehow, and by some path, you very slowly begin to move upwards. And you return, slowly, more gently than the descent, to the upper levels. Level after level passes before you. It is not an easy road. It may be very different from before. And there is a growing certainty that this road, this ascent, will lead you back, is leading you back, back to the world above, back here, back in to this room, back to the present now. And now you are back, and here, in the now, and you are also changed.

Work out what the changes are. You may still be shamed, or wounded. You did make a promise. You overcame almost insurmountable difficulties. You got lost. You despaired. You survived. You were judged. That will stay with you – and ... All this has changed you. So you are now different – what, how? Even if you fell asleep, all these things still happened on one level. Spend a while exploring what this difference, this change, actually is. Write or memorise an account of your journey of your Descent into the Dark.

5- 10 minutes pass

Now the exercise is over. Please spend some more time, maybe another ten minutes or so, doing things quietly and gently – but in silence. Get yourself a cup of tea, have a pee, etc. Finish up your writing. Maybe draw or paint something, an impression or image. At some point, find a friend and discuss this experience with them, or talk about this to someone in a supportive setting (co-counseling, therapy, etc.) This helps to concretize the experience. Keep the Promise too!

BASIC SPIRITUAL PRINCIPLES

Since there are not many Mystery Schools around now-a-days; and good gurus are hard to find and mostly live in India; and, nice as they are, the Celestine Prophecies are just fictional; I have put together some basic Spiritual Principles to help you on your journey. You do not have to accept all of these, or indeed any of them: but some of them may help you. These spiritual principles have been developed and gleaned from many different traditions. Most of the source books are included in the Reading List.

No Expectations: Be Fully Present Now! Breathe in; breathe out. Feel who you are, where you are, what you are; now! Expectations can do you over: you create them and they can disappoint you. You disappoint yourself. If you are here and now, fully present, doing whatever - the washing up, driving, making love, filing papers - then do it fully. Put all your being into it. Get ecstatic about it even, or just notice that you are doing it without a lot of enjoyment. Cultivate an interested observer rather than a judge. "Oh, that's interesting!" "Oh, now it has changed."

Most of What You Think is Wrong! There has been a human society for 4,000 years (at least), which has been male-dominated, hierarchical, aggressive, polluting, materialistic, racist, and rationalistic. These pervasive principles have denigrated nearly everything and everything else, including most of your current thinking. There has also been an increasing separation from the body, sensuality, sexuality, emotions, and pure pleasure without guilt etc. for the last 4,000 years (at least). We have also been quite quickly devastating the planet for the last 4,000 years. Spirituality has also been rationalised, denied, marginalized, separated from the individual, stolen from us, made into a Church or religion and confined to the priesthood, gurus, or mystified in some way, for at least 4,000 years. Thus we have all been fundamentally lied to, enslaved, and cheated all the way down the line. Our dreams and our goals are now all very, very distorted. You think you want something, so think again. You are a fully paid-up member of the society that is causing the problems.

Go within! The only truth for you is deep, deep inside. And it is simple. You'll know it when you find it. You won't find it just using your head, or just your body. You won't find it outside of you. Anything outside of you might be able to show you the Way, but it won't be the Way. "God" lies within and you are connected to "God" through your spirit. The Way to Spirit and to a sense of "That Which is Greater than Thyself" lies through the Body, through the Feelings, through Inner Contemplation. Truth lies within and it takes an effort to get there; to get through all the stuff in the way, the stuff of your own history and the crap that society feeds you. So practice "Inner Listening" - just listen. There is, at first, a lot of crap, and garbage in the way: the dross of everyday life: things to do, laundry lists, etc. Then there is all the "gabble" of the feelings - "if only...", "I should have...", just let this go, don't get caught in it, and go deeper. You'll get there: you just have to go within and listen.

There is a substantial difference between spirituality and religion.

Spirituality is a matter for the individual. The Dalai Lama says: "*I believe that each individual should embark upon a spiritual path that is best suited to his or her mental disposition, natural inclination, temperament, belief, family and cultural*

background.” Religions are historical channels for some of these peoples’ spiritual paths; they are meant to nourish the human spirit, guide an individual’s path in certain ethical behaviours, and make an effective contribution to the development of humanity. They have done all of these. They have also been a source of conflict and division. So, closer bonds of understanding and respect between different religions are needed.

Trust Your Process. This is a difficult one, especially if your process has been somewhat traumatic. Let me use the analogy of puberty and adolescence. When one’s teenage body first begins to change, adolescent spots, puppy fat, dizzy spells, the menarche - the onset of a girl’s periods, are all aspects of this process of physical maturation. As soon as these are explained simply and clearly, one does not see these things any longer as an aberration or pathology, but as something that is well within the normal course of events and something that will also pass. Thus you learn to trust the process (of puberty & adolescence) and not to panic at the onset of the various symptoms. A Spiritual process is similar. One has to allow and learn to accept the sometimes (also) very frightening and bizarre symptoms, and try to stay in touch with what the underlying developmental process of one’s emerging spirit is. This can be very difficult, as our society does not have proper concepts, language or structures for this process. The analogy of a Path or Journey is useful.

Know Thyself! The greatest oracle of the ancient Mediterranean world was at Delphi. For maybe 1500 years or more, people traveled long distances and braved great hazards just in order to come to Delphi, essentially to hear the voice of God. The God Apollo spoke through the medium of the Delphic oracle. This was known, accepted, and as matter of fact as we nowadays turn on the radio to listen to a speech from Parliament - not that there is really any real comparison, except that they are both as obscure as each other, for the Oracle spoke in riddles and metaphors, and politicians just don’t speak the truth. However, to get to the point, the single most important thing that they could think of to carve in stone above the cave of the Oracle was “Know Thyself”. That was it! Do that, and you are ready to hear the Voice of God.

Spiritual Practice or Meditation is Very Important. Some form of regular spiritual practice or meditation is fundamentally necessary to anyone trying to facilitate their emerging spiritual process. This is pretty universally held across many belief systems, religions and philosophies, and, what can be often linked with “Knowing Thyself”, is that the way to do this is through some form of regular spiritual practice or meditation.

It is essential for the training and development of your mental state, attitudes, and psychological & emotional well-being. Rituals, movement forms, silence, prayers, chants and special words can be a means to this end, but they are not an end in themselves.

“The man who sat on the ground in his tipi meditating on life and its meaning, accepting the kinship of all creatures and acknowledging the unity with the universe of things was infusing into his being the true essence of civilisation. And when native man left off this form of development, his humanization was retarded in growth.”

Chief Luther Standing Bear (from McLuhan’s Touch the Earth)

This quotation indicates that meditation is not just an Eastern form: it is also common to many cultures, and within the established Christian churches in the

West, Orthodox, Catholic and Protestant churches, though its practice is more often linked to a particular text or passage to be studied. It also doesn't have to be done half-naked with one's body in a contorted position. I meditate a lot walking along the road: just sitting still does my head in a bit and I'm not very good at that form of meditation. What I do know is that the *lack* of regular meditation really does my head in. The goals of these spiritual practices and meditation are usually: a calmness of mind; greater objectivity; increased compassion towards & caring for others; more tolerance; forgiveness for others' & one's own transgressions; an inner stability; an increased ability to withstand life's suffering; a reduction of anxiety; the elimination of anger and hatred; a sustenance of one's faith; an ongoing developmental personal improvement & change; different perceptions; an increasing depth of realisations; improved mental health; and a sense of peace and deep happiness. Not bad, if you can achieve it! Get stuck in. Do it regularly.

Less is More. The spiritual principle here is that a little movement, or taking just one step, or focusing on the immediate detail, or not trying to do anything too big, actually gives you more, or helps you go further. We can get sometimes get lost in the confusion of bigger picture: so focus on the single brick in front of you. Chew just one mouthful; don't try to eat the whole plate at once. Deal with this little bit now; get to know this bit, just this bit, a little better, and then the rest can take on a new and different perspective. Then you will know better what your next step is, and you can then focus on that. Lao Tse says: *In the universe, great acts are made up of small deeds. The sage does not attempt anything very big. And thus achieves greatness.* He also writes (in the Tao Te Ching), "*Less and less do you need to force things, until finally you arrive at non-action. When nothing is done, nothing is left undone.*" 'Nothing is done' because the doer and the deed have become part of the universal flow.

Attitude is Important. Amy Mindell in "*Metaskills: The Spiritual Art of Therapy*" writes well about this very well. *What* we do, and *where* we do it, is often not so significant as *how* we do it. But before we acquire the right 'how', our attitude to the Path is important. Are we following this Path in order to achieve greatness and glory? I hope not. Or are we following with a degree of humility and pleasure? Do we meet challenges aggressively, fearfully, or masochistically? Or do we say, "How interesting!" and maybe even greet difficulties with humour, "Hah-ha, this One again! Back for more work!" Of the people you meet, what attitudes attract you? This may be significant for you, now. The person who you are attracted to may not be your Teacher, but try and spend some time in their company, and acquire something of their 'attractive' attitude.

Your Path will contain both Curiosity and Confusion. You won't get anywhere without Curiosity. This is an innate principle that drives us humans forward. You have it within you, and it may have been dulled or repressed: "Don't ask Questions!" is a frequent parental admonition. So cultivate Curiosity, Enquiry, Inquisitiveness, Learning, and Concern. Ask "How?" and "Why?" Go into 'Explorer-mode' - logical, developmental enquiry. You won't ever get a fully satisfactory answer with some of this stuff, but you will be in there searching. Confusion can tell you that you are getting closer to an important answer. "What is this? I don't understand," means that you are probably on the brink of something new. You are coming to an 'edge' between the known and the unknown, at least in yourself. You cannot ever pass through this Veil into New

Knowledge without meeting Confusion, however you can sometimes also get lost in confusion, so it is not an infallible guide. Use the other Basic Principles as well.

The Path contains Opposing Polarities. Sometimes it is necessary to discover that both opposite views are true. This seems paradoxical. However it is often not “either... or...”, it is “both... and...” This was mentioned before. What you have to do in these situations is to hold both these opposites as true, at the same time, even though they seem contradictory. This is essentially a Taoist perspective, and again the Tao Te Ching informs us well on this point. In Western terms, you hold both these opposites as true in a state of Creative Tension. There is Truth Here and there is Truth There, even though ‘Here’ and ‘There’ are opposed to each other. Eventually, a third, deeper Truth will manifest itself beyond these two two-dimensional truths that seemed to have existed and contradicted themselves before. This is what you were waiting for. But, even though it is hard holding that tension, it is the way through.

You are Alone and You are Not Alone. Everyone is struggling, the same as you, but probably in a different place, and probably on a very different path. You will meet lots of wonderful Helpers on your Way: friends, partners, lovers, teachers, and enemies. And they will all leave you after a while. You really need to walk Alone at times. They also have their own Paths to follow. They grow and change as well as you. It is very rare (except in fiction or fable) that two people will be together forever. Rumi takes a slightly different perspective and writes: *“The minute I heard my first love story I started looking for you, not knowing how blind that was. Lovers don’t finally meet somewhere. They’re in each other all along.”*

The Path contains Inevitable Pain. There is no easy road, and the road to Truth and to Spirit contains Pain. You cannot stay naive. You have to grow and learn. And Pain is the Best Teacher. It is very painful leaving the state of Innocence. But you have to suffer this; there is no other Way. Scott Peck, in *The Road Less Travelled* writes: *“Life is Difficult.”* Expect that this is so, and it is less difficult, than if you expect otherwise. Along the Road, you are also essentially Alone, which can be also painful and lonely; it can also be other things. This solitude is necessary and essential to becoming an Individual. You will make mistakes. These mistakes are Painful. You have to make mistakes, and only by so doing, do you learn what is Right and Wrong for You. After a while, you will get better at it and things will get less painful. But Learning never stops, and there is never no Pain. Pain is part of Life and Pain is part of this Path - inevitably. Get used to it. It is your best Teacher because you have a tendency to learn much faster when you are in pain, more so than in pleasurable situations, when you get to enjoy (and prolong) the lesson. However, the Path is not only one of Pain. There are many Joys, and moments of Stillness as well.

There are many Different Levels. Both within yourself and outside of yourself, nothing is simple. You can feel things on many different levels; and you can operate on many different levels. What seems true here may not be true at a different level. This is both confusing and useful. What is true on one level may not be totally true on another. If you get stuck on one level, you can always switch to another level. We practice this a lot in Process Work. There is no Simple Truth, yet when you discover the Truth it is always beautifully elegant; it has aesthetic simplicity. And you will know it is True - because it is Beautiful and because it works on all levels.

There is a difference between Techniques and Principles. As you go along the Path, and as you discover your own truths, or aspects of the Truth, you will also develop your own techniques. These techniques will develop naturally for you out of the interaction between these Principles and your own experiences. Uesiba, the founder of Aikido, says that the techniques are not set in stone, but must transform from moment to moment. Don't confuse Techniques with Principles. Ultimately you will have to drop the techniques anyway, and just live according to the Principles. Many religions and therapies get hung up on Techniques. (Incidentally, these are only a few of the very basic ones.)

In order to be Strong, you will need Fluidity. Strength does not lie in Rigidity: try wearing a suit of armour in battle all day and then try making love, or cuddling your children with it still on. It doesn't work. A truly strong person is one who can take their armour off, and still survive. Try to adjust to what is happening in the moment: rigidity can work against you here. What worked 'then', probably doesn't work 'now'. And the 'now' is always changing. Change with it. Nothing natural is fixed; everything changes. Become like a Tai Chi or Aikido Master. Discover what the flow or the direction of change is, and then go with it. This way just works better. Sometimes the Path is more like a River, and you need to be alert and fluid with it, as it changes every moment. Spontaneity is very important. With these tools, the journey you are on becomes more effortless. It doesn't make it any easier, but it can make it considerably less hard work and less painful.

Don't Push the River: This is another principle to do with the process of change and being on the spiritual path. On the one hand it refers to the principle of trying not to force events: "Go with the Flow" is an aspect of this, and in this light it is somewhat similar to "Less is More". But there is another deeper aspect as well.

Your spiritual path can seem as if you are suddenly in a powerful and stormy river being carried along seemingly out of control. Many people spend a lot of time and effort trying to swim upstream back to where they were before in their lives. We hanker after our previous lives, the stability and even the 'known' dysfunctions (as we fear the 'unknown') and we try to put everything back into "Pandora's Box". However our process, the river, is carrying us somewhere else. If you swim with the current, you are just as wet but it is a whole lot easier; you are less frustrated and, instead of looking back to the past; you are seeing where this journey might take you. You may find that you can even be able to swim to the bank on occasions and rest for a bit. Switching metaphors for a moment; remember the last thing that came out of Pandora's Box, after all the evils and tribulations were let loose into the world: - Hope. Hope was the very last thing, and perhaps the redeeming feature.

The Time for the Next Step is Now: This principle relates to the metaphor of the spiritual path as a journey by land. If you are already thinking about the next step, and you know what it is, just take it now. Procrastination is not just the Thief of Time, but it is also the Delayer, the Ball and Chain. The next step is just in front of you. At any moment you can change, but which moment are you going to choose to do so? What people sometimes forget is that you can also take a step backward if you discover fairly immediately that that next step isn't the exact right one. Take it and find out. Now! If it's not right for you, step back and try a step in a slightly different direction.

This also does not mean that the next step for you might be to take some time out, away from all this stuff. This is a conscious choice; is a legitimate and sometimes necessary next step; and may be absolutely right - for a while. You are still on the Journey, but just taking some time out from the Journey for a few moments. Less is more. These few moments might give you a lot. Incidentally this journey has no final goal, no Celestial City waiting for you; no Promised Land beyond the River; no Pot of Gold at the end of the Rainbow; no Happily Ever After. These are all metaphors for the state of Enlightenment that one can reach on the Journey - and part of that state of enlightenment is when you realise that the goal **IS** the Journey itself and to travel **well** is the Ultimate Goal that any of us can achieve.

There are no Mistakes: There are no wrong decisions, no mistakes - just lessons or experiments which did not work out. In these cases make sure that you learnt something. If they did work out, but badly, in which case make sure that you learnt something different. Carlos Casteneda in *Don Juan* says (something like) this: *A magician never regrets an action; because when he regrets it, it means that not only has he not taken a good decision, but it means he also didn't spend enough time thinking about it first.* Truly seeing that there are no mistakes means that a lot of unnecessary guilt and regret is removed.

“Forgiveness is your business; not theirs.”

Forgiveness, happiness, and inner peace is all up to you. You can wait until the cows come home for someone else to forgive you, or make you happy, or for peace to come. You always, always, always have to take the first steps yourself. *“Either you become better, or you become bitter. Your choice!”*

You need to acknowledge – as people like Carolyn Myss (from whom the above quote comes) and Byron Katie teach – that most of the spiritual work required is a matter of turning things around and owning your own essential part in the process of change. Carolyn also says: *“Consciousness is about realizing that you fuel the fire.”* Byron Katie’s Work presumes that other people are who they are, and their business is their business: your job is your spiritual work, and your reactions are your business. If your thoughts and reactions (like grievance, self-righteousness, fury, or indignation) are painful; then change them. Love and accept what is in front of you, and what you are, instead, rather than hating and fearing what isn’t. You are totally responsible for your own happiness. Get it?

There is a big, big difference between Responsibility for... and Responsibility to... You are responsible **for** yourself and yourself alone. Every single one of your thoughts and actions are totally your responsibility. No one else is involved; no one else takes the credit or picks up the mess. However, you are also responsible **to** every other living thing, seen and unseen, on this planet as well as being responsible to at least seven future generations of other people, for all your actions and inactions. Your thoughts and actions affect everyone else. They may have legitimate questions about what you are doing, and how you are doing it. Listen to them - carefully. Then you may act - responsibly. You are responsible for yourself and to others.

There is no Right Way: Imagine a mountain rising up from a plain towards the sky and a ring of people all around it. They all point to the path immediately in front of them and say, “This is the Right Way up the Mountain”. Some even start to fight about it. If you go into the metaphor a little deeper, the Right Way for You can sometimes change. What was ‘Right’ then, may not be so ‘Right’ now and you

may need to cast around a little to find the new Right Way for You. There are also no Stairways to Heaven; no Fast Tracks; no Celestial Escalators: we all have to climb the Mountain, one step after another.

There is no Absolute Truth: There are also no Absolute Truths; there is nearly always a qualifying statement. One and One equals Two is only true for certain number systems: in Binary the answer is One, Zero; like Ten. God is Love depends upon your belief system. “Thou shalt not kill” might depend on whether the person is trying to kill you, or not. This statement “There is no Absolute Truth” can and should also be challenged.

The “Perilous Question” is: “How can this Wound be Healed.” Take a risk. Ask yourself this question, and you will get an answer. However most of us don’t want to ask the question, as the answer might take us over an edge. And many, many of us don’t even want to acknowledge that the wound really exists, as we would prefer to pretend that we are whole, or we just want to stay anaesthetized. So ... you have a simple way of cutting through all the confusions and denials. If you ask the question that actually acknowledges there is a wound that needs healing; or something wrong that needs righting; you will get an answer; if not immediately - then very soon. So ask!

You have your personal Angel & Daemon with you Always. Here we use some Christian/Muslim imagery. This is a little known fact - Your personal ‘Guardian Angel’ is always totally there for you, pushing you forward, helping you grow, doing what is best for you, whenever you want them, all the time - and sometimes also helping you when you are stuck. They can give you a little nudge, or kick, even if you may be enjoying being stuck. Sometimes their help hurts, if you don’t accept it. You also carry a personal Demon or Daemon with you who can take on any shape, any form, that which is needed to be your next challenge. They may seem to be against you, but that is how they help you. Get to know these two. They are your Companions on the Journey and this is all part of the quintessential package of being Human. Live with it!

We also sometimes embody Other People’s Angels, as They do Ours. Imagery again. Sometimes other people can act in place of our Angel; or when you have a sudden surge of compassion for someone, their Angel has just entered into you. Little miracles can also and will happen, time and time again, and again, and again; and we don’t know why. We have no idea. This is the work of (our) Angels. From a different perspective, if you are in the Flow of Things, then you can see or sense the Need in others. Compassion can move you to do just that thing that they need at that moment. If you are open and clear about your Needs, someone will be there for you. There is a TV car advert along these lines, where one person helps someone, and is then helped by someone else. Your needs will be met!

Your Enemy is your next Teacher. There is nothing special about loving someone that you like: it’s easy, and hardly requires any effort. Whereas ... the person that you hate, or that really gets you going - now that is much harder and you will really learn something about yourself as you consider them and try loving them. *“Loving Them! You must be crazy! They are trying to kill me!”* This is only perhaps because you are their next Teacher. These things work both ways. We don’t want to learn these lessons. These ‘Enemies’, these ‘Teachers’ are just embodying something that we don’t happen to like about ourselves. Your ‘enemy’

may also be bold enough to tell you a truth about yourself that your friends have not dared to tell you yet. Maybe you will only hear this from your 'enemy', because it is a truth that 'hurts'. Don't get too polarised: your 'enemy' today can become your 'friend' tomorrow.

You will almost certainly have to 'die' at least once. This is not just a philosophical principle; it will be an actual experience. We need to pass through the Valley of the Shadow of Death, the Dark Veil, the Fires of Hell, or whatever. In order for something new to grow, there is always a price: something old must die. And it will feel like part of you that is dying. All things have to die. Spring does not follow Autumn; there is a space called Winter in between. Things will seem dead; there will be nothing for a while. The next step is not always obvious, and it is not immediate. New seeds take time to germinate. Death and Re-birth is always a part of this Journey. You can also look positively at this. This is also an opportunity to clear out the old, to Spring Clean.

This Work is making the Abnormal Normal. What society sees (and thus part of us also see) as being abnormal, or what it denies, or condemns, or marginalizes, is actually part of a normal, healthy, individualistic, spiritual, developmental process. The problems that arise lie more with the attitudes of those outside of the process, rather than with anything within itself. And the more that we do this type of work, and the more open we are about it being a normal and healthy process, the easier we will feel with it, and the easier other people can accept it as well. This way we can make changes. The first change that has to happen comes from deep within ourselves and depends on whether we view these processes as 'normal' or 'abnormal'. Things are often not what they seem. "*See the world physically; process it internally; and interpret it archetypally:*" this is a quote from Caroline Myss again.

Be Very Careful About What You Invoke, and Be Very Precise. When you are on the Path, anything & everything that you wish for, you will get somehow: anything and everything. It is called "Manifestation" and it works. However, because our thoughts are often confused and imprecise, a distortion happens, and we don't usually want what we actually receive, even though we asked for it, or invited it. We are not talking about specifics like winning the National Lottery. We are talking about invoking certain principles: and one might be "Abundance". But you must be precise. When you invoke something like "Change", it means that you'll almost certainly get some sort of Change; but what sort of Change and Change into what? You can take things back as soon as you have said them, and it is much better to be as clear and precise as possible. That way you will get exactly what you asked for.

There are Some Things You Must Never Do - "No Way!" - Ever. They are totally inappropriate, or just plain Wrong. So Don't Do Them! Stop others from doing them, as well. And you know what they are. They are those things that feel (and usually are) Wrong, Unnatural, Unkind, Petty, Mean, or Cruel. However, in different circumstances, actions around these feelings will differ. What is an Absolutely Wrong action here, is (maybe) a Right action over there. You will still know whether the actions are Wrong or Right, but the point here is that 'Wrongness' does change with Circumstance. It is also absolutely your responsibility to stop that Wrongness. Do not say, "*It is none of my business*". If it is in front of you, it is your business. You are not there by chance.

Write: As you follow the Spiritual Path, and all its many twists & turns, dead ends & pitfalls, mistakes, and insights: write them all down. Keep a Journal and write down your lessons & observations. If you do, you will find that you are re-writing a part of all the great spiritual literature - the Koran, the Tao Te Ching, the Upanishads, Science & Health, the Course of Miracles - in your own words. The Truths are all the same. But they have different flavours and backgrounds; different images and histories; different perspectives, as will "The Book of You". But the essential truths are similar and it's good to see them written down, by you! It is also easier to remember them, to re-read them, to compare where you are now, with where you were then. That reflective component is actually perhaps the most important aspect of this writing.

Ritual has an Important Role to Play. When you know what needs to be done, either from insight, or from experience, or from a bit of both, try making it and shaping it into a little Ritual. This gives it a form, and a pattern. It also 'embodies' it a little. It gives it significance. Within this ritual, you can also change and develop things, or adapt them to differing situations: be fluid. But the ritual itself develops a momentum of its own which helps to carry the process along, and (where necessary) helps to repeat it, or to memorize it, or helps to fix it. If you don't like ritual, create a personal Sacred Space, a shrine in a corner at home, or a little altar. Spending some regular time in such a space gives you a place to calm your mind and a focus for your spiritual practice. You can put personal objects of significance here: photos; stones; gifts; rings; statues; things you pick up at significant moments or things that mean something for you. A candle often helps to focus attention; a little bell or chime helps create a moment in time; crystals are frequently found in such spaces as they draw in, or give out, certain energies. You can use paintings or mandalas, if they mean something for you. Make it yours! Change it when you need to.

Prayer has a Power beyond Anything you can Imagine. We can always Pray. We always have this opportunity and this is also a great power. It works. Caroline Myss tells a story of someone, a woman, who had a "near death" or out-of-body experience in a car accident. She experienced floating above her body and the wrecked car, and seeing all the other cars back up behind the accident. Then she felt an incredible power or energy or radiance coming from one of these cars. She floated over and there was a woman in this car and the power came from her. As she wondered what this power was, she got carried back to her body and later woke up in hospital. However, she had remembered the woman's car number and her brother or husband was a policeman, and so she got this woman's telephone number. She rang her up later and described the day and the location and the accident and then asked her what she was doing. The woman in the car said: "I was praying for the people in the car accident." Prayer is a religious experience. You create it.

Intuition and Insight need to be handled with Great Caution. Intuition is a Yes/No phenomenon. It is not an answer to a prayer: it is an internal coin-flip or a "*download of information that translates into imagery.*" Caroline Myss, again. There is nothing sacred or special about intuition: most people have a degree of these, even if they don't recognise it. Just don't romanticise it. You usually only remember when you were right, not all the times you were wrong. Self-absorption and narcissism can lead to intuition and insight being given much to high a

status. The aspects of intuition and insight are also entirely dependent on your self-image and your self-esteem. If these are distorted, so will your intuition and insight be distorted. If you truly believe in yourself, then you will believe in your insight, your hunches; and the better these will be for your higher potential. Intuition and insight can also lead you downwards if you are feeling negative; or too quickly up, if you are feeling elated. So check it out carefully. Track your own emotional level. Tread cautiously. Take full responsibility.

A Mountain is Not a Mountain, and then It Is. A Chinese Zen master once said: “Before a man studies Zen, to him mountains are mountains, and rivers are rivers. After he gets an insight into the truth of Zen through the instructions of a good master, mountains to him are not mountains, and rivers are not rivers. But after this, when he really attains to the abode of rest, mountains are once more mountains, and rivers are rivers.” We do need to see things differently. That does not mean that they will stay different. Here’s another Zen saying. *“Before I got Enlightenment, I chopped wood and carried water. After Enlightenment, I chopped Wood and carried Water.”* What is the difference?

We Don’t Know What is Going On, nor What will Happen. Most of the time there will be Great Uncertainty. This is O.K. Strange things will happen; that is O.K. too. Get into “Explorer Mode.” We cannot hope to know all the different aspects and all the different levels of this new Country that we are traveling through. We are only just beginning to discover some of these very Basic Technologies. Dreams will give us some answers. People we meet will show us the next step, or affirm the last one. Synchronicities will tell us that we are on the right track. Insights might tell us something that we need to know just up ahead. But that is about it. Any more than this and you are not in any new territory, this is old stuff, and it isn’t your spiritual path.

Relationships take on a very different quality. When you are on the Spiritual Path, friendships & relationships become more important, and much deeper. People you meet, you “know” in a different way. In partnerships, ‘apartness’ can be as significant as ‘togetherness’, both amplifying the ‘closeness’; which is very different from “marriage at a distance”. Time doesn’t matter so much; quality matters more: ten minutes of quality time once in ten years can be as, or more, significant to the friendship than seeing someone once every ten days. Friendships can transcend ‘normal’ social relationships; whether one sleeps (has sex with) with someone else is sometimes less significant than the things one talks about together, or the quality of silence between the two of you. Understanding and accepting someone else is a part of the spiritual path, and being understood and accepted as well. Scott Peck defines “Love” in psychological terms as “*a prioritisation of and commitment to the other person’s spiritual path*”.

Deep Democracy means that all the people in a group are equally important; all the different aspects or perspectives are integral to the whole; all the differing views need to be voiced - and heard; all the other parts that are usually marginalized or disavowed need to be owned and incorporated. If we exclude something, however small, we will find that our path or process recycles again and again, until that part is dealt with and we “get it” fully into our systems. There are no short cuts to this: the Path includes Everything! However don’t give “the group” too large a prominence. You may be denigrating yourself, and your own opinions, especially when they differ from the group’s. Stand in your own world:

RECOVERY & INTEGRATION

What follows now is much more what happens **after** someone has been identified as having a Spiritual Emergency, and also what happens **after** the crisis is over. They will probably have, by now, got through the actual emergency situation: with or without a Crisis Group, a psychotic episode, a major illness, or whatever.

They will be looking towards a process of healing, recovery and integration. This process will probably take a minimum of 3 to 6 months: - maybe even longer. Compare this to something physical like glandular fever or ME: that's just how long it takes to recover. If the recovery seems almost instantaneous, and may even be accompanied by a surge of insight or energy, be warned – the person may be into something different and the process may not be complete. They may be re-cycling; or avoiding something fearful with an adrenaline rush.

The most important and crucial factor in all of this is an understanding of the underlying process. If this truly has been a Spiritual Emergence process, then what is that aspect of the human “Spirit” that has been emerging? There are science-fiction stories of people who go through a transition and obtain certain paranormal powers, but until the transition is completed no-one knows what those powers are. It is up to the person to discover these powers over a period of time after the transition – and then discover how to use them properly. The concept of special “powers” is a glamorisation, of course, but the basic principle is the same. The ‘understanding’ required for recovery is an objective viewpoint, without glamorization, and where the person is capable of reflective introspection. Psychotherapy can be very useful, if not essential, here. So can quiet, alone times, Zen spaces, retreats.

Depending on your own particular belief system, religion, or cosmology (which may have changed during the Spiritual Emergence process), your contact with “Spirit” will have increased and your life may have begun to take a certain (different) or spiritual direction. It is now your job to discover what this direction is and to follow it to the best of your ability. Again, try to avoid any glamorization, grandiosity, or followers – most frequently it involves additional training, and then an extended period of service.

For many, it is relatively simple – once their crisis is over. The society they live in might basically support their process; their attempts to change themselves are largely understood; their process is in an accepted context; their symptoms are not too extraordinary, and their priest or psychotherapist can help them get through. Others have had a near-death experience, or a major illness, and have then devoted the rest of their working life to raising money for Body Scan machines, or something similar. For others, they have been to hell and back, or off this planet (and maybe I am talking about alien abductions). They need to talk to others, to ground their experiences, to accept the changes. This can be hard if the process has taken them beyond the normal bounds. But you are still human: look instead at the result. There are no set guidelines.

Please remember some “caveats”. You may well have obligations from your old life as well as a new set of obligations in your new life. It is not an “either” ... “or” ... situation: it is a “both” ... “and” ... situation. There are probably other people around you who love you dearly: they can and want to help and support you; but

they need to understand what is going on and why you may want to change your life. You will still need to pay rent or a mortgage, and possibly put something into a pension fund as well: therefore do not, repeat **not**, throw everything “old” out of the window, as you embrace the “new”. It can be an exhilarating experience, which then impoverishes and impedes you later. Keep the day job if you can, until you really know what it is that you want to do.

Much of the next section on recovery and support issues can also apply to people who have had a psychotic episode, or indeed to people recovering from any major trauma or illness.

Rather like recovering alcoholics or drug addicts, we have to go through the whole process over again, of rejecting the old dysfunctional pattern; each day every morning, every minute: at least 60-24-7 This involves a solid spiritual practice; a high degree of self-discipline; acute discrimination; routine and regularity; active ‘listening in’; non-judgmental self-awareness; access to support structures when needed; and compassion for oneself and others. Nothing else will ultimately manage to change us radically. You thought it was all over. It is for the rest of your life. Sorry about that!

Cosmology

Our belief systems and cosmology may well have changed. Depending on the type of Spiritual Emergence experience, we will also need to integrate these changes. It is **not** a good idea to be so enthused with the ‘revelation’ that you try to explain it to everyone else and then convert them, like the third Rabbi (Introduction: page 6). They may have their own process and it may be, and probably is, different from yours. What is needed is for you to work out all the little details and the twiddly-bits of your own new cosmology: does (say) a new-found Compassion for All Life involve converting to vegetarianism, becoming a vegan, not wearing leather shoes, protesting against the transport of cattle for slaughter or scientific research on animals – all very legitimate; or does it involve loving and celebrating the gift of life that we receive from all other life forms: carrots, cabbages and animals (pork, lamb, beef, chicken, fish, etc). No-one can tell you which bits you are going to need or don’t need. This is **your** belief system.

Read! Many others have traveled similar paths; much has been written. Find out what worked for others; what didn’t. Don’t try to re-invent the wheel; just refine it for your own usage. Reading diverse sets of other people’s experience will enrich your own experiences and put them into a wider context. Also share your thoughts, doubts, fears, and inspirations with others. This is very different from trying to convert them. Try to find a suitable forum where you can listen and be listened to. This process of discussion can also help you find what is right for you, and also you practice ways of expressing stuff for which we may not have a very good language. Not talking about such things can even drive you crazy.

CRUCIAL SUPPORT ISSUES

This section is mainly for the families and friends of people who have had a Spiritual Emergency. They often need quite a special set of conditions to assist their support, integration and recovery, and you, the family and friends, can play a big role here. Try to imagine it as if they had just had a triple-bypass operation followed by double pneumonia, but all on a psychological level, or to their psychic body, rather than to their physical body. Hard, I know, but this is how you may be able to help.

They will probably need a very safe emotional & psychic environment. They may need some help to make their current environment much safer and more congenial to their present situation.¹¹ They will usually need a caring, safe, comfortable home-like environment (though not necessarily 'at home' as that may have been where some of the problems were).

They may need time off work, or to take a leave of absence, or a sabbatical. This may well involved getting a 'sick note' from an informed and sympathetic doctor. Their employer should also be consulted or informed. Someone else (like you) may be needed to help to negotiate with such people, with you in a purely advocacy or supportive role.

The person may need to feel free to come and go at odd times of the day or night (sleep patterns are often disturbed); and perhaps without having to explain why, or where they are going. This can be difficult for other people in the same residential environment, especially if there has been some fear or anxiety created previously about where they were, or what they were doing, or whether they were OK or not. Specific agreements will need to be made, and then revised appropriately from time to time, about these points to make sure the arrangements work for everyone.

They will often need a retreat space – sometimes a quiet, simple, maybe even austere, room where they are not disturbed or distracted. They may need to spend quite a lot of time there, seemingly doing nothing, or writing painting, listening to music. Actually, they are probably integrating a lot and re-shaping and forming concepts and structures. It is a little like a physical healing process after an accident where the cells of the body need to re-grow and the stress and trauma symptoms need to be discharged. The synaptic connections of the mind need time to re-connect themselves after a psychic crisis.

The person may not want to involve themselves with lots of other people: they may seem quite reclusive. Close and friends and family are usually welcomed as a normalising factor, on an arranged basis, unless there are unresolved issues, in

¹¹ : This is where I differ a bit from Grof and some others. He wanted to create a residential crisis centre where the person is free "to go through their process" - but I happen to think, and my experience leads me to conclude, that this is just maintaining the separation of the unacknowledged issues about spiritual emergence from the mainstream of society. Therefore I recommend to try to educate and improve the environment around the person and to strengthen their boundaries so that they can go through what they need to in the environment of their choice. This also has a knock-on effect in that it affects and educates that person's social environment as well. Not necessarily a bad thing!

which case some family therapy may be appropriate. Some simple form of explanation or formulation about what has happened may be needed to be devised in order to avoid too many questions or long heavy silences. The person who was in crisis may prefer only to see a very few people; often the ones whom they can talk to about these matters, or who are not particularly bothered or upset. This is part of their 'normalisation' process.

They will probably also need quite a different support group. Sometimes people will join a group of like-minded people, because they talk the same language and may have had similar experiences. Grass-roots support groups are very important and significant for people in a number of fields: AA, MIND, Crisis, etc. This is as true for people with a particular form of illness, or people who have been bereaved, as for someone with a mental illness, or who has had a Spiritual Emergence or Emergency process.

Quite often a course of psychotherapy with a psychotherapist, who should be reasonably familiar with transpersonal perspectives and some of these concepts, is an excellent way to work through what has happened. It may take a little time, and a few attempts, to find the right person, but it will be worth it. Such a course of psychotherapy would normally be between three to six months minimum, but may extend much further. There is often quite a lot to work out and continuing therapy after the initial period does not indicate that the person still has problems. This therapy will probably, almost certainly, not be paid for by the NHS after any initial referral: often waiting times are at least three months. However you might be able to get some of this therapy paid for within the terms of a private health insurance scheme like BUPA or PPP, though a referral from a psychiatrist is likely to be necessary.

The person may also need appropriate medical or psychiatric treatment still. This is usually not a case of medicating the person up to the eyeballs in order to stop their psychic process. Whilst medication can destroy some of the more subtle and sensitive experiences of a person's psychic existence (Largactyl has often been described as the "liquid cosh"), medication does not necessarily restore the person to their original Self. "Appropriate medical or psychiatric treatment" might mean taking, or agreeing to take, some medication but also trying to negotiate carefully with one's doctor or psychiatrist about this, as the experience of taking such medications is often an unpleasant one: they sometimes take a while to work; they sometimes have unpleasant side effects; they can be somewhat addictive; sometimes you have to wind down off them very slowly and in a very structured way; they carry more of a social stigma than (say) Zantac. Medication can be very useful to slow down some of the hyper-manic elements often found with some forms of crisis, or to stop some of the more 'seductive' components of madness (compulsive thoughts, obsessive patterns, addictive behaviours), or any of the more chemically addictive states, until the ego-strength is stronger and better able to cope. Medication might also be targeted e.g. to help the person, and everyone else, sleep.

People who have gone through such strange experiences usually need a lot of affirmation of their process, reassurance about their symptoms, and support for themselves. This can happen through their therapist helping to affirm their psychological process and help them understand how the events and influences of their life has brought them to this point. It can also come from close supportive

friends and family members where the predominant emotions are fairly unconditional love and acceptance: good mothering types, or emotionally stable people to lean on and say back to them, "You're doing OK!"

There sometimes needs to be a clear differentiation between what are the person's symptoms and what is their underlying process of spiritual maturation. They may possibly some form of re-parenting and also learning how to manage all this material for themselves. This may also involve some help to give them a sense of true freedom, which is not license.

They will possibly also need some sort of psycho-spiritual re-education. They may need to learn to be able to handle their new experiences or different types of awareness and have learnt to ground these in consensual reality. They may need to learn to listen to their inner voices, and learn how and when to discriminate, and also when and how to follow. They may need to learn how to balance physical & psychic strength. They may need to learn how to help others properly, and when to help themselves. They may need to learn when to cut off, and when to switch on. They may need to learn deep respect for their own process. They may need to read some of the material in classic texts and learn how to apply the principles therein rather than follow the letter. (At the end of this booklet, a partial reading list is provided.) They may need to learn how to interpret their visions, dreams etc. The old concept of the "Mystery School" – if it ever existed - used ideally to teach a lot of this stuff. Some gurus teach it, and trips to India carry their own problems. Some of this material is contained in some psychotherapy education & trainings.

People who are in spiritual emergency don't usually have a teacher, so it has to be a self-learning process. They may need to investigate other belief systems. They may need a guide. A good guide guides from behind. He, or she, will tell them how to achieve something for themselves: they need to discover how to actually do it for themselves. The definition of aid is: "Do you give someone a fish or do you teach someone how to fish?" Cults and sects should be avoided. Dogmatism is probably not appropriate either.

Is a crisis really something negative? Many fevers & reactions to illness actually raise the body's state to a level best able to cope with the cause of the illness; however unpleasant that might be. Is a Spiritual Emergency just a way of putting a positive gloss on something fundamentally wrong? Is this all a load of New Age bull-....? As helpers and supporters you must make your own minds up as well. It is not just a matter of re-framing the crisis perspective from something negative into something more positive: it involves something of a new belief system, which, if it is to be used properly, has to be based on solid grounded experience, rather than affirmations, however true they may also be.

However strongly the person may believe in these positive ideas themselves, it is also somewhat insulting or insensitive to try and foist them onto other people who don't believe in them. Other people, the people around you, will need time and patience to change their beliefs, or at least come to terms as to how someone close to them can suddenly hold different beliefs. Example: For as man suddenly to leave his job, his wife and children to go and try to find his guru in India, and then also to expect them to see this as something positive and wonderful is something of a double-whammy. They still have a mortgage to pay; and they will

have to cope with feelings of abandonment. Maybe this person *is* running away from something, and hopefully a good guru would tell him so.

This person has changed, possibly quite fundamentally. You, their family and friends, may have to accept this change, or these changes. This acceptance might be very difficult. You may not accept or like the changes. You may want the “old” person back again. Often these changes are not a form of aberration that will necessarily go away with the right medical or psychiatric treatment. You must try to allow this person to be different, to recognize their pain and crisis, to listen to and share their fears and new joys, and by so doing, perhaps also help them to recognize and fully experience this difference. By following these ideas, you will stay in close contact with this person, and you will be able to show your feelings (not necessarily unconditional) of love and support, and possibly be able to help them integrate their experiences.

Maybe with this help they can find and reformulate their own belief systems and new relationships in line with these new experiences. Priests and ministers are quite well trained in maintaining this sort of differentiation, though usually limited to their own faiths, and clinical psychologists & psychotherapists can also be helpful: psychotherapy is also a form of the “new religion.”

When people come to a “plateau” where their crisis is over, the emergency therapy they may have been getting can end at this point, because the crisis is over. At this point the person may need to pick up the pieces of their own lives, integrate their experience, restore relationships, and begin make the changes in their life indicated by the process so far. However the person hopefully will also decide to continue working with their therapist to help them with these tasks, or for reasons to do more with growth or integration, rather than as part of an original crisis intervention. This is not particularly unusual. It does not mean that the person is still ‘in need’ of therapy; it is more of a choice of this type of skilled support.

There may be the complicated and contentious issue of new relationships, and something needs to be said about this here. It is a potential minefield. Some relationships (partners, families) will not survive such changes: in the same way that if a person is sent to prison, or made redundant, these life events can put such significant stresses onto the extant relationships that the result is that it is significantly damaged or torn apart. This is not the desired outcome, and is exceedingly painful for everyone, and especially so if any children are involved. People sometimes need, or choose, new partners for this new phase of their life, and everyone else has to accept this and learn to cope.

In some instances, a new relationship is formed, often quite quickly, and often intricately involved with this process of change in some way. This can be devastating for the person in the ‘old’ relationship. It is a ‘double-whammy’ or even a ‘triple-whammy’. One of my friends says, “*How many times do you want to be slapped around the face with a wet fish?*” The partner abandoned experiences that their life partner has not only had a crisis or transformation and changed significantly, but they’ve also gone off and done it with someone else, and now they, the ‘former partners,’ are the ones who have to pick up all the pieces and re-build their own life, and maybe the family’s as well, and they are now essentially alone, and abandoned. Ugh! They are often now the one’s in crisis; through no process of their own.

All that can be said is that this sort of situation is not taken lightly by anyone professionally involved. We certainly do not advocate doing things in this way. This is also sometimes how things happen to turn out. Some relationships are (what is called) co-dependant. If an alcoholic comes off the drink, their long-standing relationship may not survive as it might have been constructed emotionally around the person being an alcoholic and needing that type of 'support' (positive or negative) in their alcoholism. Now that the person is not a drinker any longer, having had their crisis, the basis for that particular relationship has changed, or been transformed. Their supporter, critic or drinking companion is thus redundant, in some way.

The person in crisis, or who has been through such a crisis, may also want to change their work, or their profession, subsequently. A mid-life crisis for men is sometimes when they realise that the work they have been doing for twenty or so years, is essentially boring for them - now. Maybe it always was and they went along with the perks; or they have just lost interest, or need to explore other aspects of their Self. They really need to change. Fine. There are plenty of new possibilities, but these may mean that some secondary changes are needed as well. Their former lives are sometimes constructed around 'that' place of work, 'that' routine, 'that' regular monthly payment for the mortgage, etc. Sometimes, it is just not so easy to change direction!

Understanding from family members can mean that, however much one may disapprove of the result, at least the motive is understood. You remain an ally, rather than an antagonist. Help may be then given to assist the person moving in their new direction; rather than resisting all change and almost creating, or forcing, an unredeemable decision.

The person who has been through a crisis or transformation may need to explore new areas of creativity, new interests, or different forms of activity. These, in themselves, are usually not very threatening. Sometimes the inability to follow these interests turns them into an imperative, and a crisis follows. A middle-class banker & family man felt impelled to give everything up and go and paint in a place where the light was right for him. It was a crisis to his family, and he himself later developed syphilis. Yet the world is much richer because of the wonderful paintings of Gauguin.

Abstract painting; art therapy; making mandalas; Taizé singing; knitting; training in psychotherapy; writing a journal; wind surfing; studying astrology; listening to baroque music; going to India; hill walking; following a new interest in esoteric philosophy; giving up medicine, writing pop songs and forming a band; adopting different belief systems and spiritual practices; changing their partner, home and job; moving to a different continent; gardening; becoming an ecological activist; raising money for a medical scanner; standing for an elected political position; writing self-help manuals; becoming a Steiner school teacher; training in shamanistic healing; etc. are all activities that various people that I know of have started, or become interested in, after such a Spiritual Emergency process, or having gone through a major illness, or transpersonal crisis. These new activities can be very therapeutic for them, potentially for others as well, and sometimes even financially beneficial as well.

The Spiritual Emergence process can be a little like going through the change from winter to spring, or spring into summer. New seeds germinate and sprout. Please don't try to weed these out too enthusiastically until you know what they are, until maybe a full season has passed. Apply this principle to the person that you know who has had a Spiritual Emergency.

Finally, you are dealing with someone who is now exploring many new aspects of their personality. They might even seem to be something of a different person. Don't worry about it too much: the old person is still there. It is just that these new aspects of their personality or psyche also need to come out and be integrated, and this is possibly what is happening now. These new aspects will tend to predominate for a while, and then a balance will be sought intuitively, or necessarily at a later stage. Try to support the person's process as much as you can.

For partners, members of the family, close relations and friends of someone who has gone through such a crisis, it really helps to be as open as possible; to be as honest as you can; to express your feelings; not to judge too harshly, or quickly, or rigidly; to take time to reflect; to give the person time; to re-educate yourself a little; to share some of their interests and activities (even if you can't share others); to share something of your own journey, your periods of growth, change, or distress; to give what you can; and to wait. If you have been deeply affected or involved, you might want to seek some sort of help and support yourself.

SOME CAVEATS – Warnings

Deliverance:

In some cases, where there is a strong Christian background, there is a natural tendency to seek help with problems from the ministry of the church. Some churches are better at dealing with these types of situations than others. The Church of England's Ministry of Deliverance has very good and clear guidelines. These are: - that the ministry of deliverance should be done:

- * in collaboration with the resources of medicine,
- * in the context of prayer and sacrament,
- * with the minimum of publicity, and
- * by experienced persons authorized by the diocesan bishop, and then
- * followed up by continuing pastoral care.

There is practice of keeping careful and confidential records, (within the constraints of the Data Protection Act). Clergy and lay people involved in this ministry should all have suitable experience, training, support and supervision. A multidisciplinary approach is to be desired, and it is recommended that those authorized for this ministry should have access to consult and work with other clergy, and with doctors, psychologists and psychiatrists. Services involving deliverance ministry should be simple and use appropriate pastoral and sacramental ministry whilst always ensuring that the welfare of the person being ministered to is of paramount concern. The Episcopalian Church follows similar guidelines.

Anything less than this is, or more than this, is probably best to stay away from. Some other churches (the more apostolic or pentecostal) seem to go a little overboard on "deliverance" – the trendy name for exorcism – and the results are not always particularly helpful to, or pleasant for, the person concerned. Deliverance becomes something the church needs to do in order to retain the 'purity' of one of its members, and thus itself, rather than helping the person in difficulties that might take them outside of the remit or experience of the church. Then one can get into some quite heavy trips.

Kundalini:

This, as mentioned, is a powerful bodily-based spiritual energy that, when opened or aroused, seems to rise up the body clearing out the different energy centres (chakras) in its path. As with anything, this energy can be **(i)** sometimes be dangerous, and **(ii)** sometimes be abused. Read up on it!

Firstly, it is recommended that any work with kundalini be only done in conjunction with someone like a qualified & experienced Body Psychotherapist and also after a general medical check-up to ensure that your body is reasonably fit and strong enough to take the force or duration of these energies. As regards the second point, there have been a number of cases of totally inappropriate methodology extending even to blatant sexual abuse from people claiming to be able to liberate your kundalini energy, using their own sexual energy or through forms of sexual contact with them. These people probably need more help than you do. Please avoid them!

As with anything, whatever you do needs to be integrated. An active Kundalini is not the answer to your prayers: an active spiritual life and fully open body may be.

Psychiatry:

Traditional psychiatry sees mental problems more as an illness only treatable by (i) medication; and occasionally (ii) therapy. This is an almost total dualist medicalisation of the person's psychological, emotional, or spiritual situation. Whilst mental illness may sometimes be present, and a psychiatric opinion should sometimes be sought (as has been indicated), the basic tenets of psychiatry do not, per se, acknowledge spirituality in any useful form, even though DSM-IV; psychiatry's diagnostic manual, does now mention a spiritual problem or crisis (see: Appendix by David Lukoff). Some psychiatrists are however much more sympathetic as individuals and may be much more open to these sorts of concepts: "*it all depends on who you talk to*". Treatment of a spiritual experience as a psychotic episode (involving drugs or other treatments) can be necessary, and yet can also detract from the spiritual component of the experience. It's a fine line, to be trod carefully.

Holotropic Breathwork: (a personal disclaimer)

Whilst I have mentioned the work of Stan & Christina Grof a number of times, and whilst I have the highest respect for all their pioneering work, their theoretical thinking and their experiences and writing within the field of working with people in Spiritual Emergencies, I cannot personally recommend their current spiritual or therapeutic methodology called, and promoted as, Holotropic Breathwork ©.

This is because: personally and professionally, I have experienced people doing these Holotropic Breathwork workshops without (what I consider to be) sufficient prior screening, and especially without significant integration work afterwards. I did sections of the Holotropic Breathwork training in the late 1980's & early 1990's, and I had contact, subsequently, when professional standards in their training organisation were being established.

These workshops can be a wonderful way to contact aspects of your psyche, usually unavailable or disowned, and some people just don't have sufficient ego-strength to manage this easily. Whilst the workshop facilitators are reasonably well-trained in the workshop technique itself, they are not (in my opinion) always sufficiently able to work with someone who may go into deep crisis, be borderline psychotic, or be on the point of a Spiritual Emergency - unless they have considerable other specialist psychotherapeutic training. Many of them do.

I also firmly believe that insufficient integration work is undertaken in the usual workshop format (other than drawing a mandala, and talking with your workshop partner), and insufficient time is given for this within the workshop structure and afterwards. I did publish a two-page hand-out to be given to participants advising them and warning them of aspects to consider. These were handed out for a while by some Holotropic Breathwork practitioners, especially those connected with the Findhorn Foundation. This organisation has ceased promoting Holotropic Breathwork workshops.

I have communicated these personal reservations to the Grofs, in person (face-to-face) and in writing to their organisation.

Alternative Therapies:

Whilst I have long been an advocate of many forms of Complementary Medicine and Alternative Therapies, there is still a serious "caveat" that I (and others) have about certain therapies, which I need to state clearly.

Many alternative health and complementary medicine practitioners are reasonably well trained in their own particular therapy. However, and here is the warning, they are not necessarily all very well-trained in professional practice, good ethics, record-keeping, knowledge of limitations and contra-indications, when or who to refer, and specialist conditions. Neither have all these therapies or techniques been properly researched, nor have they all undertaken controlled efficacy studies. So please do not put your full trust in them! They can sometimes be very useful, sometimes useless, and much depends on the skill of the individual practitioner. Some of the less well-trained complementary medicine or alternative therapy practitioners apply their particular therapy fairly indiscriminately. Some of them can even be harmful at certain stages of your process: if you have already been somewhat traumatized by a “rebirth” type of spiritual experience, serious integration is usually called for, not more ‘Re-birthing’. If you are a recovering alcoholic, stay away from flower essences and herbal remedies that use brandy as a base for the remedy. There are many other similar examples.

Cults, Sects and Revitalization Movements

Whilst it may be wonderful to be accepted as part of a like-minded group, or experience a charismatic leader who may seem to have many of the answers that you are looking for, or it may be wonderful to do work that will help bring (back) the better values of society, there are a number of spiritual and religious cults and sects and revitalization movements that, in the longer term, are not so promising or productive. There are several quite well known horror stories, and much fear and paranoia has been generated, mainly by the media. There is also some truth to these stories. So, please use your discrimination and talk to others involved, before you get so deep in that it is difficult or impossible to come out!

Ensure that you can leave the geographical location easily, and come back if you want to. Do so a few times. Ensure that there is open contact with other members of your family, and invite them along. Avoid those that put pressure on you to donate your worldly wealth, even in stages; adopt a different style of dress; or live with them all together. Avoid those with any sexual rites or practices. Avoid those where the ‘sessions’ are over-long or exhausting. Avoid those where there does not seem to be much integration into the local or wider community; or where there already is some controversy or scandal. Avoid those with a single male leader who is ‘revered,’ or overly charismatic or hypnotic. Avoid those that are newly founded or only have a few people involved. Avoid the ones that promise a new millennium, paradise, or whatever by a particular date, or on a particular happening, or through a particular person, or in a particular way. Avoid splits or subgroups dedicated to reviving a particular tradition, or set of practices. Avoid those which justify the otherwise unacceptable opposite: eg: acts of violence to promote a better world.

This is not to say that every sect or cult or revitalization movement is bad, or that any one with features listed above are essentially harmful. But they may not be right for you – yet! Some newly founded religions, spiritual groups, cults or movements in the guise of therapies have really helped people: some can be very detrimental. Please discriminate! ¹²

¹² All this would mean that you would probably have avoided the early Christians, thus avoiding possible persecution & martyrdom; so discriminate my advice as well!

General Health:

It has been fairly conclusively demonstrated that a few simple preventative measures can considerably benefit one's general mental and physical health, boost the immune system, prevent illness and infection, quicken recovery rates, assist dealing with problems, and prevent any reoccurrence of further problems or illness. These measures include:

- **Regular relaxation and/or meditation** – twenty minutes twice a day minimum; healthy sleep pattern;
- **Regular light exercise** - getting 'sweaty' for a minimum of twenty minutes, three times a week; varied types of exercise; outdoors;
- **A positive self-attitude and balanced outlook** – glass half-full, not half empty; rational *and* emotional; 'sufficient' resources; 'appropriate' attitudes; more monist (non-dualist), holistic, egalitarian beliefs;
- **A balanced healthy diet** – "Five A Day" (portions of fruit & vegetables); organic (where possible); low fat; low carbohydrates; smaller portions; regular meals; at least 2 litres of water per day; no smoking (active or passive); moderate alcohol; no drugs or E-numbers; reduced sugar, caffeine; occasional multivitamins;
- **Relaxed attitudes to life & work** – 35-hour week, regular holidays & mini-breaks, times 'off' & occasional duvet-days; stress-free & safe workplaces; absence of discrimination or hostility; either an absence of, or a relaxed attitude to, significant 'life events';
- **Varied social contact** – a 'group' of friends; intimate contact with someone; some touch, laughter, and silence; the opportunity to trust, share confidences, listen, and be listened to;
- **Appropriate emotional expression** – feeling able to, and expressing, the whole range of emotions and reactions to life events. This includes some form of personal expression, artistic expression, or method of expressing something important within you.
- **Contact with nature & different environments** – just what is says; experience of different locations, cultures, and that wonderful restorer of all, Mother Nature;

The "caveat" here is when these things are not happening on a fairly regular basis, as ultimately this will probably not be that healthy for you or your spiritual life.

THE RAINBOW

And God said, This is the token of the covenant which I make between me and you and every living creature that is with you, for perpetual generations: I do set my bow in the cloud, and it shall be for a token of a covenant between me and the earth.
(Genesis 9:12-13)

After the storm comes the rainbow. And what a rainbow! We have been talking about transformation, and you may well have been transformed. Of course, there is no one outcome of that transformation that can be described; and (which has been described) much of the outcome has been in the process of the journey itself. For myself, personally, there have been a number of “spiritual emergencies” that I have been through, both (looking back) before I visited the Findhorn Foundation and since I came to live here over 17 years ago; and possibly since I recently left.. But thankfully the phenomenon is found much wider than just at Findhorn and many different people from many different faiths and many different countries, have had many different types of their own personal apotheosis.¹³

Piero Ferrucci wrote a book called *Inevitable Grace - Breakthroughs in the Lives of Great Men and Women: Guides to your Self-Realization*, where he studied the recorded lives of more than 500 such people, people that he describes as all having exceptional capacities. He writes:

My purpose was to identify their moments and periods of greatest happiness - the states of grace they felt to be supremely significant and beautiful. I made some very encouraging findings. The attitudes and techniques adopted ... have an identical form in different ages and civilizations. This means that ... they transcend the confines of history and diversity of cultures. These ... are simple and natural ways of being. We see them at work in ourselves, too, and in the people around us. We all have them, although in an embryonic, dormant, or repressed form and it is quite likely that we could all develop them.

Some of the findings and conclusions of his amazing study give us a clear blueprint for this transformational process. His point, my point, is that spirituality, whether it stays with us throughout adolescence into adulthood, or whether it reoccurs later in our life, is a perfectly natural phenomenon. It is part of the “package” of being human – a phrase from Carolyn Myss.

Without it, we are somewhat less than human, as Chief Luther Standing Bear succinctly puts it (see Quotations below). However the phenomena of spirituality and the different pathways that it can take, or it can take us in, are very varied, as we have seen. Ferrucci divides, or makes a synopsis from the different lives of these different people of the various ‘ways’ of what he describes as ‘Transformation’ into seven different modalities. Here follows a brief description of each of the various ‘Ways of Being’ extracted from his book:

- **The Way of Beauty** is based on aesthetic enjoyment, inspiration, and creativity. In it we find the artists of various types.
- **The Way of Action** leads to the Self through disinterested service and

¹³ Many cult leaders have a personal apotheosis as well, however their character structure tends to allow them to misuse it. (see *Prophets, Cults & Madness* by Stevens & Price)

tireless involvement in the world. It is the path of benefactors and philanthropists.

- **The Way of Illumination** is founded on the practice of meditation and is taken by the great contemplatives, philosophers, yogis, and sages of all times.
- **The Way of Dance and Ritual** covers physical, externalized, and communal approaches to the expansion of consciousness. It is comprised of dancers, performers of rituals, and actors.
- **The Way of Science** leads to attainment of the sublime through research, observation, and speculation. Here we find scientists and inventors.
- **The Way of Devotion** is practiced by mystics and saints of all religions. Prayer is the main vehicle, relationship with God its central theme.
- **The Way of the Will** is the path of all who dare: explorers who venture into the unknown, inspired political leaders who confront hostile social forces, and also some athletes who challenge the limits of human capacities.

Whilst each of these ways is very varied, and by no means uniform, there are some notable similarities that happen during the process of transformation (according to Ferrucci):

“As one proceeds along a Way to the Self, one comes into contact with an entirely new realm that transcends the confines of individuality - the transpersonal level. Encountering this world can be an ecstatic experience, but it can also upset the mental balance of someone who is not prepared for it. Immature individuals may use transpersonal glimpses as an excuse for covering up their own weaknesses and avoiding the difficulties of life.”

He is saying that some people have difficulties, not perhaps just because of their ‘immaturity’, but because of the nature of what they are trying to transform. He is also stating that all, - Yes! All - of these 500 people whose lives have been recorded in detail because they are considered, in some way, “great”: that they have all had a transformative, transpersonal experience.

These are not people selected at random. They are not people who were selected just because they had a transformational experience, and we’ve never heard of them before. These people constitute the “cream” of society, the “Top 500” if you like: they are considered as “great”. And they ALL had such transformational experiences. And they ALL survived these transformational experiences. And, perhaps, just perhaps, they are “great” simply because they ALL had – and survived - these transformational experiences. Perhaps, even, it was the actual transformational experience that turned them in to becoming a ‘great’ person. Wow, now there’s a thought!

TRANSFORMATION & ENLIGHTENMENT

This is what it is all about: but what is Transformation? What are you being transformed into?

Joseph Campbell felt that old myths, legends and fairy stories gave us the clues: many of them are like road maps for this transformational journey. Eastern philosophies speak of achieving 'satori' or 'samadhi', or becoming at one with the Tao. The Buddha spoke of losing all attachments. For Rumi it was being totally conscious of the 'Beloved', in people, in nature and ourselves.

There is a state of being totally at peace with one's self; of having an expanded consciousness and the capacity for discernment; of having a spiritual marriage between the masculine and feminine within ourselves; of being relatively detached from all human desires; of dedicating the rest of your life towards others.

However for many, 'transformation' is not the end of the journey, the Celestial City, or some almost unachievable state of grace or unconditional love; it is the realization that the journey itself is very real, and worth enjoying; the goal is therefore to travel well. Do that, and you are well set on the path of transformation.

In the West, most of the images of transformational journeys – and there are as many as there are paths up a mountain – involve various defined stages. The tenets of Jungian psychology (or 'Analytical Psychotherapy') have many of these stages outlined, and some of the archetypal concepts have been included in this book: the descent into the dark; facing one's shadow; etc. The writings of Robert Johnson are a very good introduction to these concepts. (See book list)

Johnson identifies three traditional levels of consciousness: **simple** consciousness "Not often seen in our modern technological world": **complex** consciousness, where most of us are variously stuck; and then **enlightened** consciousness: "Known only to a very few individuals, which is the culmination of human evolution and can be attained only by highly motivated people after much work and training." Here, I take issue with him. I do not think that it is a once-and-for-all state; that you either have it or you don't; nor is it that rare.

I think, and it is also my experience with clients, that enlightenment frequently happens in moments and stages, and to many of us, and quite often. We can have a transcendent moment, which passes, but this experience motivates us forward. We can get somewhere wonderful, for a while, and then we lose it again; and we learn from that loss. We have flashes and insights, which pass, but they shape our vision; and there is a steady progression forwards. These glimpses of the 'divine' are what help us keep going; and they are important as they can also help modify what we need; teach us lessons; and show us the way to our personal state of transformation.

This can be as individual – as well as being universal – as we all are. For some, like Thoreau, it is the journey back to the simple level of consciousness finding happiness in a rich inner world; but to drop our usual consciousness, with our psychic energy under ego control, back into the instinctual is as difficult as raising our psychic energy and placing it under the control of our Higher Self. Enlightenment is also enigmatic, like a Zen koan:

What did you do before Enlightenment? I chopped wood, and carried water.

What do you do after Enlightenment? I chopped wood and carried water.

Enjoy the journey!

USEFUL QUOTATIONS:

Our deepest fear is not that we are inadequate.
Our deepest fear is that we are powerful beyond measure.
It is our light, not our darkness that frightens us.
We ask ourselves,
“Who am I to be brilliant, gorgeous, talented and fabulous?”
Actually, who are you not to be?
You are a child of God; your playing small does not serve the world.
There is nothing enlightened about shrinking so that other people won't feel
insecure around you.
We are born to make manifest the glory of God that is within us.
It is not just in some of us: it's in everyone.
As we let our own light shine, we unconsciously give other people permission to do
the same.
As we are liberated from our own fears,
Our presence automatically liberates others.

Nelson Mandela
1994 Inaugural Speech

There is Nothing Ahead

Lovers think they're looking for each other,
but there's only one search: Wandering
this world is wandering that, both inside one
transparent sky. In here
there is no dogma and no heresy.

The miracle of Jesus is himself, not what he said or did
about the future. Forget the future.
I'd worship someone who could do that !

On the way you may want to look back, or not,
but if you can say *There's nothing ahead*,
there will be nothing ahead.

Stretch your arms and take hold of the cloth of your clothes
with both hands. The cure for pain is in the pain.
Good and bad are both mixed. If you don't have both,
you don't belong with us.
When one of us gets lost, is not here, he must be inside us.
There's no place like that anywhere in the world.

*Jelaluddin Rumi: 425:
from 'Open Secret: Versions of Rumi'
translated by John Moyne & Coleman Barks (Threshold) 1984*

Plan for Life: by Mother Theresa

People are often unreasonable, illogical and self-centred.
Forgive them anyway.
If you are kind, people may accuse you of selfish, ulterior motives.
Be kind anyway.
If you are successful, you will win some false friends and some true enemies.
Succeed anyway.
If you are honest and frank, people may cheat you.
Be honest and frank anyway.
What you spend years building, someone may destroy overnight.
Build anyway.
If you find serenity and happiness, people may be jealous.
Be happy anyway.
The good you do today, people will often forget tomorrow.
Do good anyway.
Give the world the best you have, and it may never be enough.
But give the world the best you've got anyway.
You see, in the final analysis, it is all between you and God:
it was never between you and them anyway.

When the dreambody manifests itself as an energetic charge shooting through the spine, we could call it by its ancient name, the Kundalini. When it is experienced as the essence of life, it is Mercury. When one visualizes its energy as streaming through the body, it is the twelve meridian system. If one sees it and acts on this vision, we have Gestalt identification. If one feels it as a cramp in breathing, it is called character armor. If one senses and changes, we might speak of biofeedback. If it appears as a force pushing one in the stomach to do a new task, it is personal power. Obviously we need a unified approach to the body.

Understanding and accepting the dreambody as process, however, requires factual knowledge about its behavior and the courage to go to one's limits in order to let the dreambody come into awareness. For the dreambody itself hovers between body sensation and mythical visualization.

Arnie Mindell, **Dreambody**

I have lived
On the lip of insanity,
Wanting to know reasons,
Knocking on a door. It opens.
I have been knocking from the inside!

Jelaluddin Rumi

If you will practice being fictional for a while, you will understand that fictional characters are sometimes more real than people with bodies and heartbeats.

The mark of our ignorance is the depths of our beliefs in everything.

What the caterpillar is absolutely convinced is the end of the world; the butterfly sees differently.

Richard Bach: Illusions - Memoirs of a Reluctant Messiah

I am not a mechanism,
an assembly of various sections.
And it is not because the mechanism
is working wrongly, that I am ill.
I am ill because of wounds to the soul,
to the deep emotional self
And the wounds to the soul
take a long, long time,
Only time can help
and patience,
And a certain difficult repentance
long, difficult repentance,
Realisation of life's mistake,
and the freeing oneself
From the endless repetition
of the mistake
Which mankind at large
has chosen to sanctify.

D.H. Lawrence, *More Pansies*

The body's a mirror of heaven:
It's energies make angels jealous.
Our purity astounds seraphim,
Devils shiver at our nerve.

Jelaluddin Rumi

BRAIN DAMAGE

The lunatic is on the grass
The lunatic is on the grass
Remembering games and daisy chains and laughs
Got to keep the loonies on the path.

The lunatic is in the hall
The lunatics are in my hall
The paper holds their folded faces to the floor
And every day the paperboy brings more.

And if the dam breaks open many years too soon
And if there is no room upon the hill
And if your head explodes with dark forboding tunes
I'll see you on the dark side of the moon.

The lunatic is in my head
The lunatic is in my head
You raise the blade.
You make the change
You rearrange me till I'm sane
You lock the door & throw away the key
There's someone in my head but it's not me.

And if the cloud bursts, thunder in your ear
You shout and no one seems to hear
And if the band you're in starts playing different tunes
I'll see you on the dark side of the moon

Roger Waters - Pink Floyd

Traditional Wisdom

Knowing others is wisdom;	Whosoever knows others is clever
Knowing the self is enlightenment.	Whosoever knows himself is wise
Mastering others requires force;	Whosoever conquers others has force
Mastering the self needs strength.	Whosoever conquers himself is strong

Two interpretations of the same piece: Lao Tsu, Tao Te Ching XXXIII

The man who sat on the ground in his tipi meditating on life and its meaning, accepting the kinship of all creatures and acknowledging the unity with the universe of things was infusing into his being the true essence of civilisation. And when native man left off this form of development, his humanization was retarded in growth.

Chief Luther Standing Bear

The Four Manifestations of Beauty

With any form of Beauty, including living one's life, there are four levels of Ability. This is true of painting, literature, music, dance, acting, calligraphy, - whatever.

The first is the level of Competence. It is the ability to do something over and over again, with the same force, the same, strokes, the same rhythm, the same trueness. This level of ability is absolutely necessary. However this type of Beauty is also Ordinary.

The second level is Magnificent. This goes beyond normal skill. Its Beauty is unique to the Artist, and instantly recognisable. The artist at this level is able to capture different qualities at the same time, and hold them true together. The Observer feels things stirring within them.

The third level is Divine. A person seeing this form of Beauty has no words; they cannot describe how this is done. The Watcher remains separate, and they are deeply touched, even transformed a little, maybe never the same. It is Inspirational, and yet it can never be copied. The Artist can also never again recapture the specialness of that moment of creation, for that moment was Unique. The greater Divinity shines through in the Beauty.

The fourth level is greater than this. It is within each mortal's nature to find it. It is rarely ever attained. We can sense it only if we do not try to sense it. It occurs without motivation or desire or knowledge of what may result. It is the simplicity of being totally within, and just showing this. It is the natural wonder where everything relates to everything else. There are no separations: between the Artist and the Observer, Man and Nature, Self and the World. The Art seems to create itself. It is unquestionably Beautiful. Often there is no Observer. It just Happens. The World changes a little. This level of Beauty is called Effortless.

Adapted from *The Bonesetter's Daughter* by Amy Tan (Flamingo) 2001: p 211-212

Sometimes an angel appears in the form of a friend who says exactly the words we need to hear that day. Or you will unwittingly act as an angel to someone else, tossing off a message so casually that, although it says another person's life, you hardly remember the moment at all.

Sophy Burnham: in *Angels All Around Us*

The Story of Life in 5 Chapters

Chapter 1.

I walk down a road.

There is a hole.

I fall in.

It takes me a very long time to get out.

Chapter 2.

I walk down the same road.

There is a hole.

I fall in again.

Oh no! Not again! I can't believe this!

Eventually I get out again.

Chapter 3.

I walk down the road.

I see the hole.

I fall in again.

It takes me much less time to get out.

Chapter 4.

I walk down the same road.

I see the hole.

I walk round it.

I don't fall in.

Chapter 5.

I walk down a different road.

No holes.

Deliberate meditation is the light of consciousness; let go, and then it is the light of essence. A hair's breath's difference is that of a thousand miles, so discernment is necessary.

If consciousness is not stopped, spirit does not come alive; if mind is not emptied, the elixir does not crystallize.

When the mind is clean, that is elixir; when the mind is empty, that is medicine. When it doesn't stick to anything at all, it is said that the mind is clean; when it doesn't keep anything in it, it is said that the mind is empty.

If emptiness is seen as empty, emptiness is still not empty. When empty and mindless of emptiness, this is called true emptiness.

The Secret of the Golden Flower: *trans. Thomas Cleary: X, 14-16*

'Have you ever tried to enter the long black branches'

Have you ever tried to enter the long black branches of other lives --
tried to imagine what the crisp fringes, full of honey, hanging
from the branches of the young locust trees, in early summer, feel like?

Do you think this world is only an entertainment for you?

Never to enter the sea and notice how the water divides
with perfect courtesy, to let you in!

Never to lie down on the grass, as though you were the grass!
never to leap to the air as you open your wings over the dark acorn of your heart!

No wonder we hear, in your mournful voice, the complaint
that something is missing from your life!

Who can open the door - who does not reach for the latch?

Who can travel the miles - who does not put one foot
in front of the other, all attentive to what presents itself continually?

Who will behold the inner chamber - who has not observed,
with admiration, even with rapture, the outer stone?

Well, there is time left --
fields everywhere invite you into them.

And who will care, who will chide you if you wander away
from wherever you are, to look for your soul?

Quickly then, get up, put on your coat, leave your desk!

Mary Oliver, *West Wind*, (Mariner) 1997

RESOURCE LIST

Psychotherapists:

UK National Register of Psychotherapists, produced annually by the United Kingdom Council for Psychotherapy (UKCP), published by Brunner-Routledge for

UKCP, 167-169 Great Portland Street, London W1N 5FB

Tel: 0207-436-3002 Fax: 0207-436-3013 e-mail: UKCP@psychotherapy.org.uk

Website: <http://www.psychotherapy.org.uk>

Association of Accredited Psychospiritual Practitioners, 65a Watford Way, London NW4 3AQ. Tel: 0208-202-4525

The closest thing to a Spiritual Emergence Network that exists in the UK; an informal set-up which uses accredited psychotherapists from the Psychosynthesis & Education Trust, the Institute for Psychosynthesis, and Karuna.

Residential Centres:

Arbours Association, 41 Weston Park, London N8 9SY. Tel: 0208-340-8125

www.arbourscentre.org.uk

Psychoanalytically-oriented psychotherapy training centre with also a residential crisis centre attached, used to working with people without necessarily using medication and in a therapy-oriented community setting. High fees.

Lothlorien (Rokpa Trust), Corsock, Castle Douglas, Kirkcubrightshire, DR7 3DR, Scotland. Tel: 01644-440602

A rural residential centre for people who have mental health problems, that is run under the auspices of Samye Ling, a nearby Tibetan Buddhist community. Open to those from every belief system. Visits are needed prior to joining and a 6-month to 2-year commitment is looked for.

Park Attwood Clinic, Trimpley, Bewdley, Worcs. DY12 1RE Tel: 01299-861444

A clinic, nursing home and residential centre, based on anthroposophical medicine, with good food and a gentle holistic medical and social recovery perspective.

Association of Therapeutic Communities: www.therapeuticcommunities.org

This has a directory of residential and day-care settings that are all institutional members of the Association of Therapeutic Communities. More traditionally for the chronic mentally ill, or recovering alcoholic & drug addicts.

The Gesundheit! Institute, West Virginia, USA

Founded by Patch Adams, it provides alternative health care, an outpatient clinic, and a school for aspiring activists. Clown, as you work, as you heal!

Websites:

Spiritual Emergence Network: San Fransisco, CA, USA

Information and Referral Service 415-648-2610

<http://www.senatciis.org/>

Spiritual Emergency Network (Netherlands)

<http://web.inter.nl.net/users/itant/sen.html>

Spiritual Emergency Resource Center

<http://www.internetguides.com/se/index.html>

David Lukoff: On-Line Learning

<http://www.spiritual-emergency.com/articles.html>

EUTOTAS on Spiritual Emergency

<http://www.eurotas.org/committee3.htm>

Spiritual Crisis (Sacred Transformations) Site

<http://www.well.com/user/bobby/index.html>

From Spiritual Emergency to Spiritual Problem: Article

<http://www.sonoma.edu/psychology/os2db/lukoff1.html>

Spiritual Emergence Resource Centre

<http://www.internetguides.com/se/experiences/exp-lukoff-5.html>

Spiritual Emergencies - Diagnosis and Treatment (online course)

Approved for 8 CE credits for Psychologists

<http://www.internetguides.com/sepromo.html>

Spiritual Directors

Spiritual directors available to meet with individuals through the Internet, e-mail

<http://www.shalomplace.com/direction/directors.html>

SPIRITUAL EMERGENCY BOOK LIST:

- The Call of Spiritual Emergency** Bragdon, Emma (Harper & Row)
Excellent basic Grof-based book. Clear. Factual. Very useful for clients.
- The Stormy Search for Self** Grof, Stan & Grof, Christina (Tarcher)
The Grof's talking about SE. More depth. Good scope. OK for clients.
- Spiritual Emergency** ed. Grof, Stan (Tarcher)
Basic Grof. Writings about SE. Some good, some intellectual. Covers the field.
- The Adventure of Self-Discovery** Grof, Stanislav (Suny)
First part describes some of the new areas of consciousness and very well and gives a good model of the psyche. Not so good on Holotropic Breathwork.
- Kundalini Experience** Sannella, L. (Integral)
Good explanations of a wide field, also quite technical. Not so good for client in an SE-type situation.
- Owning your Own Shadow** Johnson (Harper)
Writes well. Deals with how to work on self. Not many others do.
- Meeting the Shadow** ed. Zweig & Abrams (Tarcher)
Good wide collection of snippets about this type of work.
- City Shadows** Mindell, Arnold (Arkana)
Good on work with psychotics; street people work emerged from this.
- Dreambody; Working with the Dreaming Body; The Dreambody in Relationships; River's Way; Working on yourself alone; The Year I; The Shaman's Body**
Mindell, Arnold (Arkana)
A series of books giving the basics of Process Oriented Psychology – one of the more useful forms of psychotherapy in this area.
- The Shaman's Body; & The Leader as a Martial Artist**
Mindell, Arnold (Harper Collins)
Two other more recent books by A. Mindell – all good, but diverse.
- Metaskills: The Spiritual Art of Therapy**
Mindell, Amy (New Falcon)
Addresses some of the spiritual attitudes that lie behind therapy.
- Fire in the Soul** Joan Borysenko (Warner)
Addresses the perspective that the wounds we suffer and heal from can be gateways to an advantageous spiritual transformation. Good quotations and USA resource list.
- The Arkana Dictionary of New Perspectives** Holroyd, Stuart (Arkana)
Clear, fairly comprehensive guide to the 'new' language of all this New Age, psycho-spiritual, stuff.
- The Far Side of Madness** Perry, John Wier (Spring)
Good early work (1974) - nice stories, cases. Focuses on renewal.

The Language of Madness Cooper (Allan Lane)
Radical perspective. R.D. Laing-ian (1978). Good for therapists.

The Seduction of Madness Podvell (Century)
Good for 4 in-depth cases. Very good concepts of self-cure and on the positive value of psychosis.

Butterfly Man Berke (Hutchinson)
Good descriptions of process. Community as a path / refuge.

Creating Sanctuary Bloom (Routledge)
Towards creating a sane society and ending family violence.

Where Two Worlds Touch Karpinski (Ballentine)
Bit simplistic. Spiritual rites of passage made easy. New Age-y.

The Courage to Heal (Sexual Abuse) Bass & Davis (Harper & Row)
Excellent self-help book for clients with sexual abuse.

Crisis Intervention Eddy, Lowson & Stilson (UPA)

Living through Personal Crisis Stearns (Sheldon)

People in Crisis Everstein & Everstein (Brunner: Mazel)

Techniques of Brief Psychotherapy Flegenheimer (Aronson)

Four books, quite traditional, on crisis intervention, brief psychotherapy etc.

A Road Less Travelled Scott Peck (Rider)
Good book especially for client on process of psychotherapy, and what is love, what is spirituality. Best seller.

People of the Lie Scott Peck (Rider)
A psychological analysis of evil. Very good.

The Madness of Adam & Eve Horrobin (Bantam)
A new book looking at the evolutionary aspects of schizophrenia. Technical.

Prophets, Cults and Madness Stevens & Price (Duckworth)
An excellent modern book from 2 well-established authors and psychiatrists which analyzes those elements (both positive and negative) that contribute to the genius of prophets, gurus, cult leaders & messiahs, and also the factors that might push these people into madness and/or differentiate them from those who are definitely psychotic. Good bibliography.

Psychosis & Spirituality ed. Clarke (Whurr)
Writings from various people looking at mainstream crisis work.

He: Understanding Masculine Psychology. She: Understanding Feminine Psychology. We: Understanding the Psychology of Romantic Love. Femininity Lost and Regained. Transformation: Understanding the Three Levels of Masculine Consciousness.

Robert A. Johnson (HarperCollins)

Excellent and very popular little books, each taking a well-known myth or fairy story and showing how this can be used as a guide for greater understanding and for transformation.

Sex in the Forbidden Zone Rutter (Mandala)
Out of Bounds Russell (Sage)
Two good books on therapist abuse, by male & female authors.

Out of Bounds Russell (Sage)
Two good books on therapist abuse, by male & female authors.

The Hidden Dimension, The Dance of Life, The Silent Language
Edward T. Hall (Anchor)
Three books about personal space, silence, language and culture from an anthropologist that gives a good new insight on how our society works.

Tao Te Ching Lao Tsu (many different translations)
Essential Reading. Classic text. The basis of Taoism.

The Secret of the Golden Flower Trans. Cleary, Thomas (Harper)
Another classic text that forms the basis of Chinese Buddhist & Taoist thought that have existed for thousands of years. A basic distillation of the inner psychoactive elements that compose a spiritual life.

The Circuit of Force Dion Fortune & Gareth Knight (Thoth)
These and other books (including very good novels on occult fiction) by Dion Fortune are about how to manage one's esoteric energy for (good) occult purposes.

CLIENT'S ACCOUNTS:

The Eden Express Mark Vonnegut (Bantam)
1960's account of son of Kurt, stoned & crazy & back again.

I Never Promised You A Rose Garden Hanna Green (Pan)
Powerful images of schizophrenia and the benefits of a good relationship with a skilled therapist.

I'm Dancing As Fast As I Can Gordon, Barbara (Harper & Row)
Psychosis induced by valium withdrawal & how to get out of hospital.

Sybil Schreiber, S. (Penguin)
Very powerful classic study of childhood sexual abuse & multi-personality.

One Flew Over the Cuckoo's Nest Kesey (Pan)
Powerful & popular account of how a mental hospital should not be. Fiction

Lightening Bird Watson, Lyall (Coronet)
Good case study of an epileptic in Africa.

Dibs - In Search of Self Axline, Virginia (Penguin)
Case of childhood autistic - very popular.

OTHER BOOKS:

Anatomy of the Spirit Myss, Carolyn (Three Rivers)
Energy medicine from popular New Age speaker and medical clairvoyant.

The Call to Adventure Rebillot, Paul (Harper & Collins)
How to use crisis to change your life - Hero's Journey ritual explained.

The Soul's Code Hillman, James (Bantam)
A brilliant book, written by a distinguished psychotherapist that offers a liberating view of childhood troubles and an exciting approach to fate and fatalism, character and desire, family influence and individual freedom, and 'calling.'

Healing your Emotions: Discover your element type and change your life
Hicks, A, & Hicks, J. (Thorsons)
Typical New Age self-help book, combining Chinese Five Elements theory combined with Neuro-Linguistic Programming. Interesting.

The Path of least Resistance: Learning to Become a Creative Force in Your Own Life
Fritz, Robert ((Ballantine)
Another typical New Age self-help book looking at how to increase your creativity, from the founder of DMA. Interesting.

The Healing Power of Mind: Meditation for well-being and enlightenment
Thondup, Tulku (Arkana)
A primer in healing meditation, based on Tibetan Buddhist practice. Useful.

Toward a psychology of awakening Welwood, John (Shambala)
Buddhism, psychotherapy and the path of personal transformation.

A = Astral Sex - Z = Zen teabags Thompson, Gerry (Findhorn)
An illustrated (fun) encyclopedia of new Age jargon + jokes. Humour is important.

Return of the Bird Tribes Carey, Ken (Harper & Collins)
Looks at native American spirituality on contemporary life.

Living Magically Edwards, Gill (Piatkus)
Psycho-spiritual metaphysics. Very good. Helps thinking on the path.

The Art of Happiness HH Dalai Lama (Coronet)
Tibetan Buddhist oriented text from a remarkable spiritual leader.

Foods that Harm; Foods that Heal Readers Digest
An A-Z guide to safe and healthy eating. Essential.

Wisdom of the Body Moving Linda Hartley (North Atlantic Books)
An introduction to Body-Mind Centering. And it needs to!

It's Here Now (Are You?) : A Spiritual Memoir Bhagavan Das

A Mythic Life: Learning to Live Our Greater Story Jean Houston
A very good book, widening the frame and oriented to self-empowerment.

The Joy of Burnout Dina Glouberman (.....)

A newly published book looking at the possibilities for a better way of life-style after a burnout or breakdown.

APPENDIX: Internet article

SPIRITUAL EMERGENCIES AS DSM-IV SPIRITUAL PROBLEMS; DIAGNOSIS OF SPIRITUAL EMERGENCY; DIAGNOSTIC CRITERIA FOR SPIRITUAL EMERGENCY.

By David Lukoff, Ph.D.

SPIRITUAL EMERGENCIES AS DSM-IV SPIRITUAL PROBLEMS

Spiritual emergencies warrant the DSM-IV diagnosis of Religious or Spiritual Problem (V62.89), even though at times there may be symptoms of a mental disorder present. In this way, Religious or Spiritual Problem is comparable to the category Bereavement for which the DSM-IV notes that even when a person's reaction to a death meets the diagnostic criteria for Major Depressive Episode, the diagnosis of a mental disorder is not given because the symptoms result from a normal reaction to the death of a loved one. Rather, the diagnosis of bereavement, which is in the same section as Religious or Spiritual Problem (Other Conditions that may be the Focus of Clinical Attention) is assigned.

Similarly, in the case of spiritual emergencies, sequelae involving hallucinations, delusions, anger, and interpersonal difficulties occur so frequently that they should be considered normal and expectable reactions to the stressful spiritual awakening. Therefore they should not be diagnosed or treated as mental disorders, but rather as Religious or Spiritual Problems that can lead to long-term improvement in overall well-being and functioning.

DIAGNOSIS OF SPIRITUAL EMERGENCY

Criteria for making the differential diagnosis between psychopathology and authentic spiritual experiences have been proposed by Agosin [1], Grof and Grof [2] and Lukoff [3]. There is considerable overlap among the proposed criteria. Wilber [4] argues that confusion in distinguishing intense spiritual experiences from psychosis has been created by failing to make the critical distinction between pre-rational states and authentic transpersonal states. This "pre/trans fallacy" has been perpetuated: "since both prepersonal and transpersonal are, in their own ways, nonpersonal, then prepersonal and transpersonal tend to appear similar, even identical, to the untutored eye" (p. 125).

The diagnostic criteria listed below were originally published in the Journal of Transpersonal Psychology, in 1985 in an article entitled Diagnosis of Mystical Experience with Psychotic Features. The use of operational criteria is intended to identify cases of spiritual emergency with a high degree of accuracy (validity) and consistency across different diagnosticians (reliability). The specific criteria proposed below represent hypotheses that must be subjected to studies to determine whether they achieve acceptable levels of interrater agreement and whether they accurately identify positively transforming experiences.

DIAGNOSTIC CRITERIA FOR SPIRITUAL EMERGENCY

1. Phenomenological overlap with one of the types of spiritual emergency
2. Prognostic signs are indicative of a positive outcome
3. The person is not a significant risk for homicidal or suicidal behavior

1. Phenomenological overlap with one of the types of spiritual emergency

Criterion 1 is based on the clinician's ability to phenomenological characteristics of the types of spiritual emergency. I have proposed five criteria by which phenomenological overlap with a mystical experience can be identified. Assessment of overlap for other types can be based on the phenomenology as described in Lesson 4 on Types of Spiritual Emergencies.

i) ecstatic mood: The most consistent feature of the mystical experience is elevation of mood. Laski (1968) describes it as a state with "feelings of a new life, another world, joy, salvation, perfection, satisfaction, glory" (cited in Perry [5] p.84). Bucke [6] examined the experiences of well-known mystics, leaders, and artists, as well as his own mystical experience, and noted they all shared "a sense of exultation, of immense joyousness" (p.9). James [7] also points to the "mystical feeling of enlargement, union and emancipation" (p. 334), and claims that "mystical states are more like states of feeling than like states of intellect" (p.300).

ii) sense of newly-gained knowledge: Feelings of enhanced intellectual understanding and the belief that the mysteries of life have been revealed are commonly reported in mystical experiences (Leuba [8]). James [7] describes this phenomenon of newly-gained knowledge ("gnoesis"): They are states of insight into the depths of truth unplumbed by the discursive intellect. They are illuminations, revelations, full of significance and importance (p.33). Jacob Boehme, a seventeenth-century shoemaker whose mystical experience ushered in a new vocation as a nature philosopher, reported: In one-quarter of an hour, I saw and knew more than if I had been many years together at a university. For I saw and knew the being of all things. (cited in Perry [5] p.92).

iii) perceptual alterations: Mystical experiences often involve perceptual alterations ranging from heightened sensations to auditory and visual hallucinations. Boehme felt himself surrounded by light during his mystical experience. Visual and auditory hallucinations with religious content are also common, e.g., Saint Therese saw angels and Saint Paul heard the voice of Jesus Christ saying "Paul, Paul, why persecutes thou me?" (Acts: 3-4).

iv) delusions with specific themes related to mythology: James [7] and Neuman [9] have both commented on the diversity of content in mystical experiences across time and cultures. The mystical experience does not have specific intellectual content whatever of its own. It is capable of forming matrimonial alliances with material furnished by the most diverse philosophies and theologies. (James [7] p.333)

Electronic media have greatly increased the repertoire of cultural material available for incorporation into both mystical and psychotic experiences. Individuals who in the past might have claimed to be St. Luke, may now claim to be Luke Skywalker. However, Perry points out that below the surface level of specific identities and beliefs are thematic similarities in the accounts of patients whose psychotic episodes have good outcomes: There appears to be one kind of episode which can be characterized by its content, by its imagery, enough to merit its recognition as a syndrome. In it there is a clustering of symbolic contents into a number of major themes strangely alike from one case to another (p.9). Based on Perry's research

and other accounts of patients with positive outcomes, the following eight themes were identified as occurring commonly in spiritual emergencies.

1. **Death:** being dead, meeting the dead or meeting Death.
2. **Rebirth:** new identity, new name, resurrection, apotheosis to god, king or messiah
3. **Journey:** Sense of being on a journey or mission.
4. **Encounters with Spirits:** demonic forces and/or helping spirits.
5. **Cosmic Conflict:** good/evil, communists/Americans, light/dark, male/female.
6. **Magical Powers:** telepathy, clairvoyance, ability to read minds, move objects.
7. **New Society:** radical change in society, religion, New Age, utopia, world peace.
8. **Divine Union:** God as father, mother, child; Marriage to God, Christ, Virgin Mary, Radha or Krishna.

In contrast, the following statements from schizophrenic patients I have worked with illustrate that not all delusions have content related to the eight mythic themes described above.

My brain has been removed. A transmitter has been implanted into my brain and broadcasts all my thoughts to others. My parents drain my blood every night. The Mafia is poisoning my food and trying to kill me. My thoughts are being stolen and it interferes with my ability to think clearly. The person claiming to be my wife is only impersonating her. She's not my wife.

Familiarity with the range and variation of content in myth, religion and psychosis is essential for determining which delusions have mythic themes.

v) absence of conceptual disorganization: Some psychotic patients have cognitive deficits which cause them difficulty with their basic thought processes. For example, a person with schizophrenia complained, "I get lost in the spaces between words in sentences. I can't concentrate, or I get off onto thinking about something else" (in Estroff [10] p. 223). Systematic comparisons of first person accounts of mystical experiences and schizophrenia have found that "Thought blocking and other disturbances in language and speech do not appear to accompany the mystical experience" (Buckley p. 521). Therefore, the presence of conceptual disorganization, as evidenced by disruption in thought, incoherence and blocking, would indicate the person is experiencing something other than a spiritual emergency.

2. Prognostic signs are indicative of a positive outcome

Criterion 2 is based on research-validated good prognostic indicators that help predict positive long term outcome. The features listed below are based on a survey of the outcome literature (Lukoff, 1986). Good prognostic indicators include:

- 1) good pre-episode functioning
- 2) acute onset of symptoms during a period of three months or less
- 3) stressful precipitant to the psychotic episode
- 4) a positive exploratory attitude toward the experience.

3. The person is not a significant risk for homicidal or suicidal behavior

Criterion 3 concerns issues which might require treatment in a restricted environment. Psychotic disorders can be the basis for homicidal and suicidal behaviors. Both John Lennon and President Reagan were shot by persons with

previously diagnosed psychotic disorders. Arieti & Schreiber [11] have described the case of a multiple murderer whose auditory hallucinations from God and delusions of being on a religious mission fueled his bizarre and bloody killings. Assessment of dangerous and suicidality are legal responsibilities of licensed mental health professionals. This exclusionary criterion should be implemented only if the danger seems imminent. Behavior which appears bizarre, but presents no risk to self or others, does not warrant use of this criterion. Even with the use of these criteria, it is often difficult to distinguish spiritual emergencies from episodes of mental disorder. Agosin (1991) has pointed out that, "Both are an attempt at renewal, transformation, and healing" (p. 52)

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THE AUTHOR:



Courtenay Young is an accredited Humanistic, Transpersonal & Body-Oriented Psychotherapist, UKCP registered, who has worked in various different locations in the mental health field for about 20 years. He has working in psychiatric hostels, and with psychiatric & socially disadvantages adolescents. He has been the resident psychotherapist at the Findhorn Foundation, an international spiritual community located in north-east Scotland for over 17 years, and is now working in the NHS near Edinburgh as a Psychological Therapist.

He is the Regional Co-ordinator for Scotland of the Spiritual Emergency Network and writes books and articles, gives training seminars, conference lectures and workshops on Spiritual Emergencies for psychotherapists in the UK, Europe and the USA, and is hoping to start up a project in Edinburgh, *The Sanctuary Project* for people in spiritual crisis and emergencies.

He and his wife, Laura Hope Steckler, run week-long residential workshops at Findhorn, and also 3 & 4-day workshops elsewhere, entitled *The Spirit of the Body*, a combination of spiritual emergence work, movement exercises, and body-psychotherapy.

Courtenay is currently writing a much larger book on Spiritual Emergencies, entitled *When the World Changed*, for publication in 2004/5, as well as two or three other books. He can be contacted by e-mail: cyoung@findhorn.org

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