

# **KNOWING REALITY**

**Psychotherapists' and counsellors' experiences  
and understandings of inexplicable phenomena  
while working with clients**

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## **ATTESTATION OF AUTHORSHIP**

“I hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person nor material which to a substantial extent had been accepted for the qualification of any other degree or diploma of a university or other institution of higher learning, except where due acknowledgement is made in the acknowledgements”.

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## **ABSTRACT**

This hermeneutic phenomenological study explores eight psychotherapists' and counsellors' experiences and understandings of 'inexplicable' phenomena that sometimes occur when working with clients.

The purpose of the study is to stimulate thinking about these experiences and bring them into conversation within the psychoanalytic community.

The findings emerging from this research reveal that inexplicable phenomena may occur when therapists and counsellors are in an 'open', meditative state in which the boundaries between self and the world seem lessened and time and space are experienced differently. The phenomena may take many forms, including the apparent knowing about events that are later reported by clients, which it would not have been possible to 'sense' in the usual way, and the seeing of semi-solid forms, which may be static or moving.

The meanings made of the experiences vary according to different spiritual and theoretical worldviews but, invariably, the experiences are interpreted as receiving a communication from, or being attuned to, the unconscious mind or a spiritual intelligence or source of knowledge. This is discussed in relation to psychotherapeutic, phenomenological and spiritual literature.

Occultism is another field we shall have to conquer... There are strange and wondrous things in these lands of darkness. Please don't worry about my wanderings in these infinitudes. I shall return laden with rich bounty for our knowledge of the human psyche (Jung to Freud 1911: Mc. Guire, 1991, p. 223).

I advise against. Don't do it. By it you would be throwing a bomb into the psychoanalytical house, which would be certain to explode. (Freud's letter to Ferenczi, (1919) when the latter wanted to present his telepathic experiments to the next IPA conference (Jones, 1957, p. 42).

Freud wrote to psychic researcher , Hereward Carrington, that: "If I had my life to live over again, I should devote myself to psychical research rather than to psychoanalysis" (Jones 1957, p. 32). In 1929, Freud denied having said this but Ernest Jones tracked down the evidence of the letter (Farrell, 1983).

## CHAPTER 1: INTRODUCTION

This study is a hermeneutic enquiry into the sorts of inexplicable knowings and sense phenomena psychotherapists and counsellors experience in their consulting rooms, but which are not discussed openly within the psychotherapeutic community and for which there is little theoretical language. The study explores the lived experience of a range of inexplicable phenomena as well as the states of being therapists and counsellors were in at the time of the experience. It also explores the meanings they make of their experiences, within their psychotherapeutic, spiritual and cultural worldviews.

Although I interviewed both psychotherapists and counsellors, I only refer to the literature from psychoanalysis and analytical psychology and so exclude many other theoretical worldviews. This is both to limit the scope of the study and because one of the aims of my study is to show the gaps in the psychoanalytical theory, which underlies the theoretical modality of my own professional community. My aim is to begin to discuss phenomena, which are seldom acknowledged publicly or written about. During the course of the research, fundamental philosophical differences between phenomenology and psychotherapy, as well as contradictions within psychotherapeutic literature, have emerged and these will be addressed. I have also reviewed some literature from traditional, spiritual belief systems that offer relevant understandings of the phenomena. However, because it is a huge field, I have chosen not to review all spiritual literature but I do discuss the place of spirituality within psychotherapy within the discussion. The reasons for this will become clearer in the study.

Firstly, I will outline some important philosophical differences between psychotherapy and hermeneutic phenomenology. Philosophically, hermeneutics is a constructivist approach, which says, “reality only consists within the context of a mental framework (construct) for thinking about it” (Guba, 1990, p. 25). Therefore, within hermeneutic philosophy “atemporal, ahistorical, or transcendent knowledge is impossible” (Leonard, 1989, p. 50). In contrast, psychotherapy, perhaps because it is constantly evolving, straddles an interpretive and a Cartesian stance. However, although in the

process of change, its underlying philosophical base is the Cartesian worldview, which places importance on the separation of an experienced internal world and an objectively perceived external reality. This conceptual frame, which divides the world into inside and outside, self and other, fantasy and reality, is dualistic. In this way, its philosophical position is critical realism i.e. “although a real world, driven by real natural causes exist, it is impossible for humans to perceive it with their imperfect sensory and intellectual mechanisms” (Guba, 1990, p. 17). Psychotherapy also speaks of an atemporal realm of the unconscious mind, which exists for itself, beyond the perceived world.

The differences between the philosophical frameworks of my research methodology and my theoretical background have made me reflect upon the conceptual and dualistic nature of psychotherapy theory and how its dualistic nature has meant that phenomena, which are not easily categorized into dualistic concepts, have found little understanding within psychotherapy. Therefore the discussion chapter of this study is partly an engagement with the philosophical assumptions within psychotherapeutic theory. I believe that engaging with the theory in this way will enable phenomena, which have previously been excluded from theoretical consideration, to be brought into discussion.

I have divided the research report into the following chapters.

Chapter 1: In the next section of chapter 1, I discuss some of my own personal and professional pre-understandings and the biases, which I am aware of, in relationship to my topic. This is important because, within this methodology, particular emphasis is placed on my awareness of the attitudes and assumptions I bring to the research as part of the hermeneutic circle of meaning making.

Chapter 2 is a literature review. I have divided this into two sections. The first section outlines some present and past cultural understandings of divination as well as encounters with ‘spiritual’ forces or forms, which are traditional ways of interpreting some of the phenomena described in the research. The second section outlines relevant aspects of psychoanalytic and analytical psychological literature, which have

influenced my own and some of the participants' thinking about the phenomena and provides the basis of the later discussion chapter.

Chapter 3 outlines the philosophy of the hermeneutic methodology, the methods used to gather and analyse the data, and the ethical considerations and issues of rigour relating to the research.

Chapter 4 presents the findings using excerpts from the participants' stories, to bring the reader closer to experiences as lived. The data is presented in themes entitled: Experiencing inexplicable phenomena; Being open; and Being attuned to something more. These describe many different stories of 'inexplicable' experiences, the participants' lived experience of the state of consciousness they were in at the time, and lastly, the meanings the participants make of their experiences.

Chapter 5 discusses how the findings are supported and challenged by the existing psychotherapeutic, phenomenological and spiritual literature. Discords, conflicts and gaps, particularly within psychoanalytic literature, are revealed and new ways of thinking about these phenomena introduced. The discussion is in six sections, which follow the interpretations that have emerged from my findings and the issues that have arisen in relation to how these phenomena are viewed theoretically.

Chapter 6 concludes my study by addressing its strengths and limitations, making recommendations for practice, supervision and training, as well as further research.

## **Word definitions**

Firstly I will outline the way several words are used within this study for the clarity of the reader.

### Psychodynamic psychotherapy

This is a modality of psychotherapy, which based its ideas in psychoanalytic theory. The ideas on which psychoanalysis based its theories are explored as part of the study so I will not describe these more at this point. Because all the psychotherapists who took part in the research are from this modality, when I use the word ‘psychotherapist’ or ‘psychotherapy’ I am referring to psychodynamic psychotherapy.

### Analyst

Within both psychoanalytic and analytical psychological literature, the word ‘analyst’ is commonly used. At times I also use the word ‘analyst’ when I am referring back to literature just quoted, or when I am distinctly taking about psychoanalysis. I will make it clear I am making distinctions between psychoanalytical and analytical psychology. However, in general I will use the word ‘psychotherapist’ because this is the word used within the New Zealand psychotherapy community. I will also use it as a generic term, which includes both psychoanalysis and analytical psychology at times, for instance when I am contrasting ‘psychotherapy’ with phenomenology and need to use an umbrella term.

### Patient/ Analysand /Client

Within both psychoanalytic and analytical psychological literature, the words ‘analysand’ and ‘patient’ are commonly used. However, I will use the word ‘client’ instead, because this is the word used within the New Zealand psychotherapy community.

For the purposes of this study, I ask that readers read ‘analyst’ and ‘psychotherapist’ as synonymous and ‘patient’ and ‘client’ as synonymous.

### Inexplicable

I use the word inexplicable to refer to phenomena that are not explainable in the Cartesian worldview, which is based in Newtonian science. This worldview says that the world is objectively real and measurable. Space is three-dimensional and time is linear. Information can pass only in mechanical ways e.g. as waves or particles. Our senses are dependent upon the mechanical transmission of information through space and cannot pick up information over distances such that sound waves, light waves or smell-particles cannot travel.

### Intuition

The immediate apprehension of the mind or sense without reasoning (Sykes, 1982).

### Occult and Paranormal

These words are used by Freud to refer to the sorts of phenomena that are commonly called ‘spirit encounters’ and ‘telepathy’ or ‘ESP’ (extra sensory perception).

Telepathy’ or ‘ESP’ refer to experiences in which thoughts or emotional or physical states can be inexplicably ‘known’ by another person.

### Perception

The word ‘perception’ is used to refer to an ascertaining of something in the world outside (bearing in mind that all perception is interpreted) as opposed to an experience of sensing something, which does not exist, as in a hallucination.

### Spirit and Spiritual

‘Spirit’ (in quote marks) is used in two ways: with a capital “S” it is used by Maori to refer to a sense of greater ancestral ‘Spirit’ (Wairua). ‘Spirit’ with a small “s” is used to refer to ghosts (kehua), which take an individual human form.

‘Spiritual’ refers to the experience of interconnectedness with the world, which may also be associated with the presence of divinity.

## Real

The word 'real' is used to refer to both a subjective experience, which has a quality of truth, and to the sense that what is being perceived exists 'objectively'. I make it clear throughout the study which way I am using it

## **My personal background and Pre-Understandings**

I was fascinated by science when I was at school. This was fuelled by a strong desire to know and understand how inexplicable things "really" worked. This scientific background and tendency to want to find the 'absolute' truth of a matter is a bias to my study because it means I emotionally struggle to accept the post-modernist view that there are many equally valid interpretations of reality, although intellectually I believe this to be true. One of my heroes is Albert Einstein and my desire is similar to his: "There remains something subtle, intangible and inexplicable. Veneration for this force, beyond anything that we can comprehend, is my religion" (Albert Einstein, 1879 - 1955). This desire to know something beyond is evident in the research.

The research is also based in my longing to understand my own personal experiences of seemingly inexplicable knowings and experiences of sensing things that are happening in others' bodies. For example, I have often been mystified by the way in which I can seem to know things about a client, their issues, personality etc. after just the initial phone contact. As well as being a psychotherapist, I have studied at the college of psychic studies in London and experimented with others forms of 'divination' e.g. the I Ching and tarot cards, and have been to see psychic mediums. I have also taken part in shamanistic rituals and journeys in workshop situations. All of these things have left me with mixed feelings about their possible meanings. However, having had many personal experiences similar to those explored in this study has biased my ability to approach the data completely afresh. After conversations with other psychotherapists which led me to believe I am not the only one to have such experiences, I decided to explore others' experiences and understandings to bring to light experiences that have often been kept secret and, in so doing, bring their

existence out of the shadows and begin to create language with which to talk about them.

## **My professional background and pre-understandings**

My first introduction to psychotherapy was at a psychoanalytical organization in London called the Philadelphia Association, where I did an introductory course. This was founded in phenomenological principles and the work of Heidegger was taught. Although at that time, in 1985, I felt this was an important home for my thinking, I trained in a more traditional psychoanalytical organization, called Association of Group and Individual Psychotherapy, London, where I learnt about the thinking of Freud, Klein, Jung, Winnicott and other object relations theorists. Trying to integrate phenomenological and psychoanalytical ideas in this research has been meaningful for me because it has helped me integrate previous influences in my life. I have also spent one year doing an archetypal, Psychosynthesis training, at an organization called Revision, also in London. All of these theoretical ideas have influenced my thinking. I am aware that I come to this research arguing with some psychoanalytic thinking, particularly with its tendency to pathologise spirituality and inexplicable experiences and interpret every experience in terms of a mechanical psychological process. This is a bias I bring to the study. Over the last 6 years, since I have been living in New Zealand, thinkers, who have challenged the traditional assumptions of psychoanalysis, have influenced me. This research has also come out of my attempts to resolve and integrate my own thinking about the conflicting theoretical influences I have had. This has in turn influenced what I have chosen to discuss in this thesis.

## **Choosing hermeneutic phenomenology**

When I first began my research, I chose grounded theory as my methodology because my scientific mind was keen to create a theory about the phenomena. But, after doing two interviews and presenting them in a grounded theory study group, I began to realise that there was a mismatch. The data and the phenomena somehow didn't fit with the type of questions I was supposed to ask as a grounded theory researcher. I

also began to realise that the sort of language used by the participants was more congruent with that used in phenomenology. Six months into my research, therefore, I changed my methodology to hermeneutic phenomenology. Although drawn to phenomenology, I felt that dwelling on the lived experience alone might not enable me to explore the meanings of the phenomena as much as I might wish. Hermeneutic phenomenology seemed to enable me to illuminate both the lived experience and the interpreted meanings, thus matched the goals for my research. It has also been an excellent way of calling me back from being possessed by my desire to know in a conceptual way, back to the question, back to the detail of the experience and to wonder and awe.

## **Previous research**

I have been unable to find any research that reports therapists' and counsellors' experience of inexplicable phenomena in the way I have done. However, both Freud and Jung addresses the subject of what Freud called "uncanny" phenomena (Freud, 1925). The only example of New Zealand research on the subject that I know of is that by my supervisor, Stephen Appel (2000), who wrote about his clinical experiences of inexplicable visual phenomena. Recently, several British and American analysts have begun writing about experiences of spiritual and ineffable phenomena in psychotherapy (Totton, 2003, Whan, 2003). I have also found one research paper, Simmonds (2004) that explores psychoanalytical psychotherapists' views on spirituality and addresses its difficult place within psychoanalysis. There is also a considerable amount of quantitative para-psychological research that has been done in the area, with their varying levels of success and rigour. I have used some of these studies to help me think through some of the issues that have arisen from the data.

The goal of my research is to open up this area of phenomena for discussion within the field of psychoanalysis, which provides the theoretical basis for my own psychodynamic therapeutic community. By deconstructing some of the confusion around these phenomena and understanding why they have been excluded from

research and literature, I hope to stimulate new interest and thinking about an area of clinical experience that has had little attention.

## **CHAPTER 2: LITERATURE REVIEW**

I will explore two areas of literature in relation to this research. First, I will outline several different past and current cultural understandings of divination and encounters with ‘spirit forms’, which are traditional understandings of the sort of phenomena I am researching. Second, I will outline the literature from psychoanalysis and analytical psychology, particularly that on the unconscious mind and unconscious communication as these ideas are most relevant to way the phenomena being researched have been understood theoretically. I have also chosen to review these particular areas of literature because they inform the worldviews and language used within my own therapeutic community.

### **Divination and ‘spirit encounter’ in cultural history**

Traditions in which people believe themselves to be able to tune into a greater power, receive divine direction, predict the future or have encounters with ‘spirits’ of the dead have a long history, and exist in many cultures including Druidry, Shamanism, Aboriginal, Maori as well as Christian. Tuning into or receiving messages from a divine source or entity is often called divination. Understandably, because human beings have been and are still relatively powerless in relationship to the forces and wonders of nature, which we did not create, many people assume an underlying order or power of creation or nature. Trying to understand and ‘know’ the laws of the invisible forces or seeking the help of the great powers of creation brings a sense of control and gives human beings a sense of being in relationship to these great forces. In medieval and early renaissance times, the idea of being able to divine was based in the universe as “a static concept, with influences coming down from the stars, controlling the fates of those below” (Giles, 1994, p. 81). Many religious traditions still base their beliefs on the idea of an all-knowing and powerful God figure. However, in recent times, divination and spirituality are often considered more relational co-creative processes. Many westerners have also been fascinated by some of the traditional cultural beliefs that involve entering different states of consciousness,

or trance states, and sects of western culture have grown up around these ideas. One of these is shamanism, which I will refer to in later discussion.

### *Shamanism*

Shamanism is a spiritual path that has its roots in oral traditions but has been revived by many modern practitioners. Shaman are a type of medicine man or woman especially distinguished by the use of journeys to hidden worlds otherwise mainly known through myth, dream, and near-death experiences (Harner, 1998). A basic implicit principle in shamanism is that there are two realities, an ordinary and a non-ordinary reality. Ordinary reality is the day-to-day reality of living in the physical world, whereas in non-ordinary reality, a person may encounter 'spirits' of persons, animals or plants. A shamanic practitioner is thought to move back and forth at will between these different 'realities' or states of consciousness. For the shamanic practitioner, the existence of spirits is not a belief or hypothesis but rather a lived experience. The 'spirits' encountered in shamanic journeying are believed to be 'real' because, just as within phenomenology, there is no distinction made between subjective and objective experience (Harner, 1998).

### *Maori*

In traditional Maori belief, which is also held by many Maori today, there are two categories of beings, supernatural ones [Atua] and people [tangata]. The word Atua can be translated as 'God or spirit', though the word 'God' does not have the same implications of a Christian God who is to be worshipped (Orbell, 1995). In the Maori worldview, prophecy is often thought to take place when a spirit enters the body of a medium, or tohunga (guardians of sacred knowledge), takes possession of him and speaks through him. A tohunga may also "see" or foretell events via dreams (Orbell, 1995, p. 220). This ability to predict the future is also called 'matakite'. Williams (1971) translates matakite as 'the seer', 'the vision' or 'to practice divination'. The word wairua is used to refer to spirits of those alive as well as dead. The wairua is thought to be able to leave the body during sleep and travel around. If someone dreams of a distant place, their wairua is thought to be visiting that place (Orbell, 1995, p.

240). The wairua of ancestors are also considered to dwell within the living and so affect the behavior of people in the present. This is reciprocal in that people are present in their ancestors as well as their ancestors are present in them. The wairua of ancestors are also believed to visit living people, often communicating through a living relative, who is a medium. Through this person, the ancestor can act as a guardian of the living relatives. Up until the 1850s the presence of ancestral spirits was generally referred to as wairua but in the 1850s, the word kehua, meaning 'ghost', seems to have entered the language (Orbell, 1995, p. 85). Kehua was then used to refer to the souls of the dead. Just as in the western world the word 'spirit' can mean either the individual human spirit of life or a ghost, the word wairua can be used two ways also. However, in the Maori world, as much as the western world, there is much debate about the nature of kehua, and the uncertainty about the existence of supernatural beings (Orbell, 1995, p. 85). In a Maori worldview people are not the only creatures who have spirits or souls. Spirit and gods are thought to dwell in all living and some non-living forms (Orbell, 1995, p.117). This cultural worldview underpins the spiritual beliefs of some of the participants in my study.

I refer back to these ideas in the discussion chapter.

## **Literature review for psychoanalytical and analytical psychology**

This literature review outlines relevant areas of theory from two schools: psychoanalysis, originated by Freud, and analytical psychology, originated by Jung. This because both Freud and Jung wrote about the sort of inexplicable phenomena explored in this study, in a way that few have since. The literature, which shows how the two men conceptualized the unconscious mind and unconscious communication, is particularly reviewed because these ideas are important in understanding the phenomena.

Although Freud and Jung defined 'the unconscious' differently they, nevertheless, both referred to it as an aspect of mind that exists, objectively, in a Cartesian way.

In contrast, phenomenology uses the word unconscious, not to refer to a thing but rather to a state of being unconscious or, perhaps, to a state of being non-self-conscious. Merleau-Ponty says, “Unconscious is to be absent from oneself while being present in the world” (cited in Romanyshyn, 1982, p. 156). Van Manen refers to pre-reflective rather than unconscious states.

However, the conceptual way the ‘mind’ and the ‘unconscious’ has been, and is, thought about within psychotherapy is of primary importance in laying out the context in which the psychotherapists and counsellors in this research make sense of their experiences. The idea that human beings are individuals with separate minds and separate identities is intrinsic to western ideas of mental health and also intrinsic to the idea of individual responsibility. In contemporary western society, it is problematic to believe we do things because we are possessed by ancestral spirits or voices from God, or can think or feel others’ thoughts or experiences. Within the medical model and psychotherapy, these things may be considered to be signs of psychosis. Because of this, psychotherapy considers that “the capacity of an individual to distinguish what is real and important in the external world and what is fantasy and subjectively true in the internal world is a psychological function of prime significance” (Williams, 2004, p.1). It is a characteristic of maturity and creativity.

### ***The unconscious / reality and fantasy (in psychoanalysis)***

Freud placed importance on developing a psychoanalysis, which was based in the scientific principles of his day. Because of this, many of his ideas are based in Newtonian concepts of particle physics. Freud’s schema of the individual mind, as divided into conscious, and unconscious, id, ego and superego still underpins much of the psychoanalytical understanding of the mind today. In Freud’s view the unconscious mind was thought to contain forgotten or repressed memories and forbidden, primitive id-instincts, which were kept hidden from the conscious mind, but which could be re-found. The purpose of analysis was to bring unconscious memories to consciousness, like a model of an archeological dig. However, this way of speaking conveys a sense of ‘the unconscious’ as a place, with content. Freud also spoke of unconscious processes, which were timeless and operated on the pleasure principle.

He believed that the unconscious primitive impulses of the id needed to be brought into relationship with the reality of the external world by the ego. “The ego seeks to bring the influence of the external world to bear upon the id and ...endeavours to substitute the reality principle for the pleasure principle which reigns unrestrictedly in the id” (Richards, 1984, p. 363).

Speaking of ‘the unconscious’ as if it is a place and associated with primitive impulses and the wish-fulfilling fantasies of the pleasure principle, as opposed to the reality principle, has become accepted into everyday language by most of the western world. This split in the way reality and fantasy has been defined partly derives from Freud’s famous and controversial reversal of his seduction theory. Originally Freud believed that actual events, e.g. childhood sexual seductions were the cause of neurosis. However, Freud seemed to change his mind, after the IPA (International Psychoanalytic Assoc.) did not welcome this idea. He then announced that, although actual abuse may have sometimes happened, the cause of neurosis lay, most often, in childhood sexual fantasies, which were assumed to be unrelated to any external ‘reality’ or sexual abuse. It was out of this premise that Freud developed his Oedipal theory, which posited sexual desire in the child. From this point on, psychoanalysis has remained focused on analysing conscious and unconscious internal, subjective states. However, at other times, Freud spoke of the unconscious as an intelligent and intentional process especially in dreams, which he viewed as the ‘royal road to the unconscious’. He said that: “The unconscious is alive and capable of development and maintains a number of other relations with the Preconscious, amongst them that of co-operation” (Devereux, 1974, p. 197).

However, Post-Freudian Mahler’s (1963) description of the “regressive longing” for the “fantasised ideal state”, which she described as “the perfect and blissful state of union between infant and mother” (cited in Chirban, 2000, p. 7), led to a further languaging of the unconscious, and what are often called ‘oneness’ states, as regressive and being based in a desire for pleasure, which is equated with the evasion of reality. From this, the definition of psychological growth came to be defined as a linear growth towards maturity and the realisation of the ‘reality’ of our ‘separateness’ and away from the ‘fantasy’ of union with the mother.

Unaware of the positivist assumptions, the early analysts believed that they were the upholders of the reality principle while looking at their patient's internal regressive, paranoid or pleasurable 'fantasies' and primitive desires, which were revealed and analysed. The analyst was therefore thought of simply as a blank screen. Mitchell (2000) suggests that: "British psychoanalysis has been dominated by Kleinian theory, in which actual family interactions are regarded largely as the medium upon which the child's primitive fantasies are projected" (p. 84). Melanie Klein called the state of mind in which a client projects his fears and inner states onto the therapist, 'the paranoid position', implying that the projections are not 'real' perceptions but paranoid 'delusions'. When a person is in touch with reality he/she is described as being in the depressive position, which is associated with the capacity for mourning, reparation, empathy, and tolerance of ambivalence. Reality thus became equated with being in touch with the 'truth' of the external world and fantasy became equated with the internal world. This either/or split and the pathologising use of the words regressive, primitive, fantasy, illusion in relation to the unconscious is still predominant in certain analytical circles.

Donald Winnicott (1896-1971) began to bridge the way fantasy and reality had been so starkly divided in psychoanalytic thinking between an objectively viewed external reality and a subjectively experienced internal fantasy by paying more attention to the lived experience. He suggested that "we experience life in the area of transitional phenomena, in the exciting interweave of subjectivity and objective observation, and in an area that is intermediate between the inner reality of the individual and the shared reality of the world that is external to individuals" (Winnicott, 1980, p. 75). In also suggesting that fantasy or illusion was not only primitive and regressive but that, in a modified way, it is an ongoing part of human life, and inherent in art and religion he ameliorated the analytical tendency to pathologise fantasy and illusion as only based in wishes that needed to be outgrown. Winnicott also placed importance on the analyst's ability to just 'be', rather than to 'do' (or analyse), because he believed an analyst's, like a mother's, ability to 'just be' laid the basis for a client's, or baby's, development of a sense of self-continuity in a core experiential way (Winnicott, 1980). Winnicott coined his famous statement "There is no such thing as a baby", to convey the sense that a mother and a baby do not exist without the other. He suggests that an

infant's identity develops out of an initial total identification with his/her mother and refers to how "two separate people can feel at one but here at the place I am examining the baby and the object are one" (Winnicott, 1980, p. 94). Here he distinctly says that he is not talking about the subjective experience of "feeling at one" but emphasises that the object and baby (mother and baby) "are" one, as if this oneness is literal. It is unclear what Winnicott means by this. Winnicott also refers to transitional areas or spaces in a way that "it is hard not to suppose that he is sometimes thinking about an actual physical space between mother and baby" (Wright, 1991, p. 74.) This literalism in his language informs the way his ideas are used in common language. It may also say something about the difficulty in describing something as ineffable as the lived experience of loss of boundaries between fantasy and reality, self and other, without using spatial concepts. Even though Winnicott placed more value on the lived experiences of undifferentiated or what he called 'transitional' states, in which we experience the 'interweave of fantasy and reality', his language nevertheless retains the Cartesian split between the concepts of fantasy and reality and subjective and objective experience.

### *The unconscious (in analytical psychology)*

Possibly influenced by the quantum science that was emerging in his time, Jung's view of the mind differed from Freud's in that he spoke of the 'Self' (with a capital S), which he differentiated from the ego or individual 'self'. He envisioned the individual self as being like the peak of a wave, emerging from a much deeper and vaster interconnected ocean of a 'collective unconscious' from which the greater 'Self' had access to divine principles, or universal mythic images called archetypes. In his view, the collective unconscious contained spiritual intelligence and treasures and so his approach to analysis was of a reciprocal relationship between the conscious and unconscious, rather than the one-way movement from unconscious to conscious, which Freud suggested. Jung (1963) said: "It may be assumed that just as the unconscious affects us, so the increase in our consciousness affects the unconscious" (p. 301). Jung also thought of dreams as more straightforwardly mirroring or communicating messages to us about aspects of ourselves that needed to be balanced. In this way Jung saw both the unconscious and dreams as having an intention to heal.

Jung did not believe the process of the unconscious to be based in fantasy in the way Freud and the post-Freudians did, but more clearly emphasized its intelligence and perceptive powers, which were beyond the usual, “as the result of its spacio-temporal relativity” (Jung, 1963, p. 292). Jung also wondered about whether the boundaries of the psyche did not correspond to those of the mind and body and in 1955 suggested that:

It may well be a prejudice to restrict the psyche to being ‘inside the body’. In so far as the psyche has a non-spatial aspect, there may be a psychic ‘outside- the body’, a region so utterly different from ‘my’ psychic space that one has to get outside oneself or make use of some auxiliary technique to get there. (Cited in Schwartz-Salant, 1998, p. 81)

Jung is not speaking of the psyche as being literally outside the body in a spatial sense, but rather suggests that it may have a non-spatial aspect, in the same way as he speaks of the unconscious.

Both Freud and Jung believed that significant communication took place between the unconsciousness of the therapist and client, described the unconscious as having qualities of being outside time and space, and grappled with the problem of a therapist knowing things they did not know how they knew. However, both men had different ways of conceptualizing how this could be.

### ***Unconscious communication (in psychoanalysis)***

Because he envisaged the unconscious as a part of the individual mind, Freud spoke of unconscious communication, between analyst and patient, as if it was a transmission through space. He advocated that an analyst should “turn his own unconscious like a receptive organ towards the transmitting unconscious of the patient...so the doctor’s unconscious is able... to reconstruct [the patient’s] unconscious” (Freud, 1912, p 115). Here Freud speaks of the unconscious as if it is both an aspect of mind that ‘transmits’ information and a perceptual organ.

Although Freud’s reputation of being a reductionist scientist has become widespread, the mystical side of Freud who was interested in “the phenomena of thought transference”, which he felt to be “closely allied to telepathy” (Freud, 1933, p. 97) has

not become so widely known. However, because such ideas were contentious and associated with “the occult” (Eisenbud, 1946) and the paranormal, Freud was anxious about “what would happen if the devotees of psychoanalysis were known as trafficking the black arts” (Eisenbud, 1946, p. 260). When his friend Ferenczi wanted to present his telepathic experiments to the IPA conference, in 1919, he wrote to him saying, “I advise against. Don’t do it. By it you would be throwing a bomb into the psychoanalytical house which would be certain to explode” (Jones, 1957, p. 42). These anxieties still infuse the psychoanalytic community today and create a context in which apparently ‘telepathic’ experiences are still treated as occultist or dangerous. This will be explored further in the discussion.

An important development, in psychoanalysis, in thinking about communication between minds took place in 1950, when Paula Heimann began describing what she called ‘countertransference’. The word ‘countertransference’ is often used to refer to an analyst’s response to a patient’s transference. This is based on the idea that a patient ‘projects parts of his or herself into the analyst’. The analyst is then thought to use his or herself as ‘a container’ for the client’s projections. Countertransference can also be referred to as projective identification. Projective identification is based on the idea that the analyst identifies with what has been projected into him/her. The analyst’s (or therapist’s) processing of a client’s projections is referred to as ‘reverie’, which is defined as when an analyst “takes in the infant’s own feelings and give them meaning” (Hinshelwood, 1989). In this way it has become commonplace for psychotherapists to talk about ‘taking in’ and ‘feeling the client’s feelings’, as if the client’s feelings are literally transferred into them and that what they feel is identical to how the client might feel it. However, Thomas Ogden (1979) emphasises that projective identification is to be viewed as a “group of fantasies” (p. 370). I will discuss the literalism in these concepts, which is in common use within psychotherapy circles, as well as division of these experiences into fantasy or reality, in the discussion chapter.

Recent thinking in psychoanalysis is beginning to move away from the idea of the analyst as an objective observer and towards looking at the analysis as a whole as an inter-subjective process, which recognizes the influence of the analyst on the dynamic of the therapeutic relationship. Ideas of ‘analytic’ or ‘interactive’ fields, between the

analyst and patient, have become more widespread in the language of psychotherapy. The concept of the 'analytic field' is another scientific and spatial metaphor to try to find language to discuss experiences that occur in therapeutic relationships that do not seem to fit into the self /other, internal/ external dichotomy.

Ogden grapples with the mysteries of how the mind of the analyst and patient can seem to be permeable to one another by envisioning a 'third subjectivity', which he calls the analytic third, which is "unconsciously co-created by analyst and analysand". He qualifies this by saying that "the analytic third is not a single event experienced identically by two people, it is an unconscious, asymmetrical co-creation... which has a powerful structuring influence on the analytical relationship" (Ogden, 2000, p. 2). He describes this "third" as seeming to take on a life of its own in "the interpersonal field between the analyst and the patient" and may take the form of the analyst acting out in some way or being controlled by something that is "in the room" (Ogden, 2000, p. 2). However, Ogden does not intend to imply that his concept of the interpersonal field is a literal field and thinks of the analytical third in the same way as he does of projective identification, as a fantasy, a "somatic delusion on the part of the analyst" (Ogden, 2000, p. 2). However, in this way he appears to shift from an interpretive to a dualistic Cartesian philosophical stance, which indicates a lack of clarity around his ideas.

### ***Unconscious communication (in analytical psychology)***

Because Jung saw the collective unconscious as providing an underlying inter-connection between individual minds, he did not envisage a model of transmission between separate minds. He used the word synchronicity to refer to when an event in the external world seemed to match an event in the internal world, without an obvious causal connection between the two. One of the most famous examples of this is a story in which a woman, who was in therapy with Jung, dreamed of receiving a scarab-pin. While she was describing the dream, Jung heard a buzzing rap at the window. There, simultaneous with the woman's story, was a golden beetle, similar to the Egyptian scarab beetle, which is a symbol of rebirth in Egyptian mythology. When Jung considered the relationship between the dream and the arrival of the beetle at his

window, he was struck by the strange ‘knowledge’ that the psyche seemed to have of the event to come. Sure that there was some significance in the two events, and yet unable to explain them in a causal way, Jung began to look to the possibility that the unconscious ‘knew’ of the event and that the beetle was sent as a message. He wondered if this could be “a revelation of the transcendent wisdom of the self” which could transcend space and time boundaries as we usually think of them (Mansfield, 1995, p. 200). He suggested that the collective unconscious might operate similarly to non-local quantum effects, in which individual electrons seem to be sensitive to information latent in the whole system.

### *Summary*

I have outlined the historical and current concepts and language used to describe the unconscious mind, unconscious communication, and inexplicable phenomena within two important theoretical schools. Although psychoanalytic theory has evolved through time, it remains largely based within Cartesian conceptual thinking and, though Winnicott’s and Ogden’s contributions bridge the fantasy / reality divide by referring to transitional spaces and the co-creation of experiences, nevertheless, they retain the essential Cartesian division between fantasy and reality, which is based in Newtonian physics. Within psychoanalysis, inexplicable phenomena like ‘thought transference’ are associated with ‘occult’ ideas, which are dismissed today just as they were in Freud’s time. Analytical psychology, although still Cartesian in its worldview, uses different concepts, which are less pathologising of seemingly acausal events and looks to a model of quantum physics to explain such occurrences as real possibilities, in a way that psychoanalysis does not. I will be referring back to these different ideas throughout the discussion and exploring how each supports and does not support my findings.

## **CHAPTER 3: RESEARCH PROCEDURES**

### **Methodology and philosophy**

Hermeneutic phenomenology was chosen as the methodology for this research because it facilitates exploration of both the lived experience and the meaning participants make of their experiences. Hermeneutic phenomenology is attentive to the phenomena because it lets things speak for themselves and show themselves as they appear. However, as it also believes that there is no such thing as an uninterpreted phenomenon in our awareness, it is also concerned with interpretations of experience (van Manen, 1990). Hermeneutics is an ancient discipline that can be traced back to the early Greeks. The early Greek root of the word ‘hermeneutics’ suggests the idea of “bringing to understanding, particularly where this process involves language”. That is, “something foreign, strange, and separated in time, space, or experience is revealed so as to seem familiar and comprehensible” (Leonard, 1989, p. 50). This resonates with the spirit of my research, which is to think originally about foreign and strange experiences, in order that they might become familiar and comprehensible. Gadamer (1996) also expresses something of the purpose of my research when he describes hermeneutics as, “The attempt to grasp the unpredictable character of the spiritual and mental life of human beings” (p.165).

Leonard (1989) distinguishes the phenomenological view of a person from the “17th-century Cartesian notions of the self, in which the self is viewed as subject, an uninvolved entity passively contemplating the external world of things via representations that are held in the mind. In the Cartesian worldview, the self is always seen as subject and the world, or the environment, as object” (p. 41). In contrast, in the hermeneutic phenomenological view, everything is believed to be contextual and interpreted. It recognizes that different worldviews result from different experiences of life. Thus the possibility of absolute truth does not exist because people interpret the world from different historical and cultural contexts. In hermeneutic phenomenology, the “ world” is not the environment-as-object as described by science. It has a fundamentally different meaning from the common understanding of the world as

environment, or nature, or the sum total of the “things” in our world. In a phenomenological sense “world” is neither “held in the mind” nor “out there” to be apprehended” (Leonard, 1989, p. 44).

Because the hermeneutic approach differs from the psychoanalytic tendency to divide the self from the world in a Cartesian way, I will use hermeneutic methods to describe and reflect on the data and will discuss my findings in relation to both hermeneutic and psychoanalytic worldviews.

### *Pre-understandings*

I follow the hermeneutic premise, as expressed by Gadamer (1976), that understandings are embedded in history and bound by it. In this way, all new experiences are interpreted in the light of previous experiences and understandings and the range of possible interpretations of experience are both created and limited by one’s history. Gadamer refers to this as a horizon (Gadamer, 1975). Horizons and language provide the context of human understandings. Possible understandings are also limited by what is already known and believed. This means that I, as the researcher, the participants, my supervisors, as well as all the literature I have read, each bring their own cultural and contextual understanding to the subjects we are speaking or writing about. However, in dialogue and in writing horizons can be changed and extended. Each new telling of a story, for example, opens the possibility of encountering different interpretations (from self or other) thus enabling the development of new meanings. For this reason it has been important to consider the pre-understandings or prejudices I have brought to this thesis. Showing the effect of historical consciousness (Gadamer, 1976) is essential to the credibility of this work because readers need to appreciate how the researcher’s pre-understandings have influenced their interpretations. I have explored my pre-understandings through my own memo writing and used this to reflect on how my presuppositions have influenced the data gathering and the interpretative process.

### *Hermeneutic circle*

Though we make individual interpretations of our experience we also draw on the interpretations made by others and so create shared meanings of our experiences (van Manen 1990). Through both ongoing self-reflective thought and conversation, a circular and evolving process is created and meaning develops dialectically between interpreter and author in a 'hermeneutic circle'. For example, as the participants remembered their experiences and put them into words, during the interviews, they reflected upon and modified what they had just said, as they listened to themselves speak and as they were stimulated by my questions. In this way they were already reinterpreting their original experience in a dialogue with themselves and in relationship to how they understood what I was asking and saying. As the researcher, I have further interpreted participants' stories and chosen particular aspects of them, according to my own interests. The themes that have emerged, therefore, reflect a combination of the participants', my own, my supervisors' and other writers' interpretations. In this way, I have extended my own previous understandings. This is an example of what Gadamer would call a fusion of horizons (Gadamer, 1975). Within the hermeneutic circle the researcher and research participants share common practices, skills, interpretations, and everyday practical understanding by virtue of their common culture and language (Leonard, 1989). However, because the participants and I have not had ongoing dialogue throughout the process of writing, I cannot say that the end product would necessarily be representative of a fusion of their views and mine from their point of view. It is a description of my interpretation of a phenomenon, which they have experienced in various ways.

### **Method**

This section will begin by presenting the process and procedures used in this research. It includes getting approval for the study, selecting the participants, the collection and analysis of the data and the process of the writing. Lastly I address the ethical issues and the way I attended to the rigour of the study. My aim, in relation to this research, is to gain knowledge and understanding about the occurrence of 'inexplicable'

phenomena in the psychotherapy and counselling situations, so that such experiences may be able to be understood and used more effectively by practitioners in the future.

### ***Approval for the study***

The Auckland University of Technology Postgraduate Committee granted approval for this study, on 15 March 2002. The Auckland Ethics Committee of the Health Funding Authority also granted ethics approval, on 13<sup>th</sup> May 2002 (Appendix A).

### ***Selecting the participants***

I used purposive sampling because I needed to find people who had experienced the phenomena I was wishing to research. “A good informant is one that is knowledgeable about the topic” (Morse & Field, 1998, p. 121). Following an advertisement for volunteers in both the New Zealand Association of Psychotherapists’ and the New Zealand Association of Counsellors’ newsletters, I received ten inquiries from people who were willing to share their personal experiences. The participants were practising psychodynamic psychotherapists and counsellors who were both knowledgeable from an experiential perspective as well as having a theoretical and professional understanding of the phenomena, so might be expected to be able to reflect upon their experiences, responses and interpretations. “Good informants must be willing and able to critically examine the experience and their response to the situation” (Morse & Field, 1998, p. 24). I interviewed eight of the ten volunteers, in order of application, until a sense of sufficiency (Colaizzi, 1978) had been reached.

### ***Participants’ cultural /religious affiliation and theoretical background***

Of the eight, three were Maori and five Pakeha. Four of the five Pakeha were white New Zealanders of Celtic decent and one was Eastern European. The Pakeha participants were from a range of religious spiritual affiliations (one Christian, one Ayurveda, and three not religiously affiliated). All the Pakeha participants were psychotherapists. Of the three Maori participants, one was a psychotherapist and two were counsellors. Although my original proposal had only included psychotherapists, I

culturally extended it to include counsellors, in order to include more Maori, and thus get a more inclusive perspective on the experience and honour the Treaty of Waitangi.

### *Gender*

Two of the eight interviewed were male and six female. This ratio is similar to the proportion of males to female amongst psychotherapists. I did not note any particular differences between male and female stories nor meanings and have not found any research that indicates that gender makes a difference in experiencing these types of phenomena.

### *Collecting the data - the interviews*

I offered the participants the choice of individual or group interviews and all chose individual interviews. The interviews were approximately one hour long and all were tape-recorded. Most were done in either my consulting room or the participant's own consulting rooms, but one was done on the telephone. Before each interview I sent out information about the intention and process of the research (Appendix B) and informed each person of their right to withdraw at any time and not to answer any questions with which they felt uncomfortable. If the meeting was in my rooms, I offered the participant a cup of tea. In most cases we talked a little at first, in order to create a relaxed and friendly atmosphere. On the occasions that I knew the participants from the psychotherapy community, we acknowledged the slight strangeness of being in the different context of the interview. However, overall, my sense is that participants who knew me were more able to be more relaxed and open than those who did not. Before the interview began, we went over the information sheets together and participants were invited to ask me any questions. I then informed them of their rights again and asked them to sign a consent form (Appendix C).

Sometimes, at the beginning of an interview, people wanted to know more about my approach in relation to my research questions. Therefore, I often shared a little of my own experience, in order to normalize such experiences. To begin each interview, I asked each participant an open question about a time when they had experienced an

inexplicable phenomenon in relationship to a client. From that point on questions arose out of the story itself. I used both open and closed questions to explore the detail of the experience being described more closely, or to direct the participants' attention to an aspect that they may not have dwelt on. When it came to asking about their interpretations of their experience I encouraged them away from the common tendency to use the familiar psychotherapeutic language with a question like "What other way might you describe your experience or understanding, if you did not use psychotherapy language"? During the interviews, as I listened to the stories, I noticed myself trying to tune-in to what the person was speaking about on a feeling level. Sometimes, when the stories were beyond my own experience, I noticed my feelings of disbelief arising, because of my own prejudices, and I could see how therapists and counsellors telling these stories in supervision may well stir a supervisor's anxieties. Recognizing this, I was aware of consciously trying to approach the interviews with an open mind. I thought of van Manen quoting Sartre, "The glance of the other can be experienced by us as objectifying and as robbing us of our own sense of agency and subjectivity. The other's objectifying look takes away our world and enslaves us to the other" (van Manen, 1997, p. 347). If my approach were objectifying, it would have easily closed down the participants' telling of their story, because many have already had experiences of being dismissed by medical professionals or supervisors.

### *A strange occurrence with a transcription*

A strange thing happened after the interview with my second Maori participant. This was a complication that arose because she was also a friend. The interview itself went normally but, unusually, instead of transcribing the interview myself, as I had been doing up until this point, I took up her offer to type up her own interview in exchange for my doing some sewing for her. Because it was her own interview I decided that confidentiality would not be compromised. She typed the interview onto her hard disk and then transferred it onto a floppy disc, which she gave to me. When I put the floppy disc into my computer, the file would not open. Worried, I asked her if she still had it on hard disc and was told that, no, she had deleted the hard disk copy because she had been feeling worried that she had broken a tapu with what she had told me. We discussed how she felt about this further and she decided that she did not want the data

used in the research any more. I accepted this but, as we were both so intrigued by this mystery, she decided to try to open the file anyway, to test if it was just my computer that couldn't open the file. When I gave her back the disc and she tried to open it, the file opened but proceeded to delete itself, line by line, from the bottom up, before her eyes, until it had disappeared. She closed it and tried it again and the same thing happened. This felt like a living experience of an inexplicable phenomenon entering into the research procedure itself. In conversation with the interviewee, we became aware of the possible meanings to the event; the scientific explanations of a chance corrupt-disc; an intervention by a spiritual entity for breaking a tapu; or the possibility that she may have, out of 'resistance' or anxiety, unconsciously chosen a corrupt disc. This was also at a time when I had been reading about a particular research experiment in which young chickens appeared to have influenced the movements of a robot who was programmed to move in a pattern according to a pre-recorded, randomized disc. After the experiment, it was discovered that the pre-recorded randomized disc was, in fact, no longer randomized. Some similar questions arose: had her desire (like the chick's) affected the disc; is emotional or spiritual interference possible, or were we entering the territory of paranoia? Nevertheless, whatever possible meanings we could make of it, I was respectful of her wish for me not to reuse the data and I reinterviewed her. She also typed the second interview and there were no problems.

### *Analysing the data*

I transcribed five of the eight interviews myself. I used a transcriber for two and the interviewee, mentioned above, typed one. Transcribing the data myself helped me get closer to the detail and get a sense of the essence of the experiences being described. I transcribed the scripts in full leaving in all hesitations, repetitions etc. However, the pieces of speech, used in the text of the thesis, have been edited to exclude repeats, hesitations, floundering etc. I do not believe this changes their meaning to any extent. I read through the scripts several times, each time underlining the things that stood out to me in coloured pen. Van Manen (1990) calls this 'the selective highlighting approach'. In this approach, the researcher looks for statements in the text, which are revealing of the phenomena. Each time I reread the scripts, I noticed different things. What attracted my attention and what I resonated with partly seemed to depend on my

mood or what I had just read, and changed over the time as my understandings developed. In this way a fusion of horizons was created (Gadamer, 1975). I did not divide the interview into sections but rather approached the whole interview at once, trying to get the feel of the whole thing. Van Manen (1990) calls this ‘the holistic or sententious approach’. This approach has the researcher reading the text and reflecting on the fundamental meaning of the phenomena described by the interviewee. I was particularly drawn to the parts of the interviews that stood out as being the most alive, e.g. having the most energy, affect and emotion for the participant. I also noticed themes about the lived experiences of lived time and space, and bodily responses as well as feelings of connectedness to the others and the world around them. Van Manen (1997) speaks of these as the four-lifeworld existentials, which are the basic ground by which all humans experience the world. He calls these: lived space, lived body, lived time and lived human relationality. I was also particularly drawn to new aspects of, or ways of thinking about the experiences, which excited me and stimulated thoughts of possible new meanings. Thematic analysis is a process of drawing out the themes in a way that is “not a role-bound process but a free act of ‘seeing’ meaning” (van Manen, 1990, p. 79). I then extracted what I felt to be the essences of the scripts into stories, which reflected the significant emotional states, and the meanings made by the participants, without changing the original meaning too much. Analysis is a process of hermeneutical reflection on the texts to create a new text. This analysis is my own interpretation of the themes and essences of the phenomena. I have tried to reflect on the experience from the inside (experiencing) rather than from the outside (observing) perspective (van Manen, 1990). I found my familiarity with similar experiences useful in enabling me to relate to the participants’ experiences from the inside. However, my identification and similarity of theoretical background to many of the Pakeha therapists meant that I was also limited by the same frames of thinking as they were. My desire was to get to the most primal sense of the experience and capture its essence. Van Manen (1990) calls this capturing of the essence of something as crystallizing it like poetry: “Poetizing is thinking on original experience and thus speaking in a more primal sense” (p. 13). These reflections enabled the identification of common themes and patterns that describe the participants’ lived experiences and reflections as well as my own interpretations.

I then gathered readings from various texts, which seemed to echo the themes, words and patterns that were occurring to me from the data. I noticed how, each time I reread something, be it data or a theoretical text, I came to new understandings and the themes that stood out to me changed over the circular process of my reading, writing, in discussion with my supervisors, and as my understanding of hermeneutic phenomenology deepened. The hermeneutic view is that the meaning of a text, and speech, is not fixed but continues to change in relation to the mind of whoever is reading and interpreting it. Thus “discovery of true meaning is never finished. It is an infinite process” (Gadamer, 1975). Several times during my writing I cut up my writing and played with the themes, sequence, and connections, by moving the pieces around. Because the themes did not fit together in a linear way but everything seemed interconnected, it was not easy to come to the final order. Each time I reordered the themes new connections came to mind. This required the writing and rewriting of my themes and their discussion many times, which is an integral part of the hermeneutic method. At times during the writing of this thesis I have not only felt influenced by everything I have read and conversations I have had but, at some points, I have felt ‘guided’ to access a paper, which provided the missing piece that I needed at that moment. I have experienced living the research question in an embodied way. Van Manen (1990) says: “The act of researching – questioning - theorizing is the intentional act of attaching ourselves to the world to become more fully part of it, or better to become the world” (p. 5).

Through the struggle to analyze this data, I have relived the experiences described, as well as had inexplicable experiences of my own. In my attempts to understand the experiences, I have struggled with the seeming oppositions in the many ideas I have encountered and come face to face with the reality of there being no one truth. And yet at the same time, I feel the need for the validation of shared perception in order to bring these experiences into conversation and accord them some credibility and worthiness of consideration and further research.

## **Ethical considerations and rigour**

The rigour of this thesis can be established using the criteria below, which reflect the ontological and epistemological understandings and methodological presuppositions of hermeneutic phenomenological research.

### ***Consent, confidentiality and anonymity***

After making an appointment with participants I sent out an information letter (Appendix B), which explained the process and purpose of the research and told them of their rights to stop the interview or to pull out of the research, at any time, with no explanation required. When I met each participant, I reassured them of the anonymity of the information they confided in me i.e. that their names would be coded and known only to myself, and possibly a transcriber. The names used in the thesis are changed to protect participants from identification in any published account of the research. I also informed them of the confidentiality of data, which would be kept in a locked cupboard for 6 years in my supervisor's office, before it would be shredded. I also informed them that they could have access to the transcript of their interview, after it had been typed up. One person asked for this and I sent her the transcript of her interview.

### ***Culture / Treaty of Waitangi***

I have approached this research with the Treaty principles of partnership, participation and protection in mind. Before I embarked upon the research I met with a Maori elder and healer at the Awataha Marae to discuss my research, and how I might approach Maori counsellors and therapists to research the sensitive area of 'matakite', or 'seeing', which is a central concept in Maori spiritual belief. I also spoke to the Maori liaison person on the AUT psychotherapy training-course. They were both supportive and interested to discuss the research. I believe this research is in the interest of biculturalism, as its aim is to extend the psychotherapy knowledge base about the

different frameworks of understanding that therapists bring to their work, including different cultural and spiritual understandings.

### ***Emotional distress***

Although psychotherapists and counsellors are not generally perceived to be a vulnerable group, the discussions have led into emotionally sensitive areas (e.g. culture and spirituality). Safety was ensured, partly by my experience as a therapist, and all the participants involved were in their own therapy and/or supervision. Some of the participants and I knew each other personally but, if anything, I believe this made the participants feel more trusting in talking to me than those who did not know me. I have not noticed any changes in my relationship with those participants as a result of their involvement in the research.

### ***Trustworthiness***

The trustworthiness of qualitative research is difficult to establish but Koch and Harrington (1998) suggest that reflexivity and self-awareness in the researcher is particularly important. In selecting appropriate criteria for evaluating the trustworthiness of my study, I have decided to utilise notions of self-awareness, reflexivity, credibility, auditability, transferability and sense of sufficiency.

### ***Self-awareness / reflexivity***

Hermeneutic research calls for self-awareness and reflexivity on the part of the researcher. It is suggested, by Koch and Harrington (1998), that a research process is a reflexive exercise where the “researchers bring to the research product, data generated, a range of literatures, a positioning of oneself, moral sociopolitical contexts...” (p. 887). In the literature review, I have placed the phenomenon in both cultural history and therapeutic theory. I have questioned the origins and adequacy of my interpretations in order to do justice to the participants’ experiencing and understanding which are unique and different to my own. This began with clarification of statements made by the participants during the interviews and continued throughout

the analysis as I referred back to the original data frequently. I have also reflected on my personal and theoretical pre-understandings, in an ongoing way and included a description of these and how they may have influenced my data collection and analysis. I am aware how my ongoing process of understanding and integrating modernist pre-understandings has informed and changed my thinking as the research progressed and how this, at times, has conflicted with my previous scientific history and own desire to know in an absolute way. The horizons of my own understandings have met with those of the many different philosophical texts I have read, as well as with those of the participants and my supervisors in a 'collaborative analysis' (van Manen, 1997). My supervisors have also illuminated and challenged some of my biases. My understandings have been developed and become clearer during the process of reading and rereading the experiences and each time new interpretations have emerged. This is not a final interpretation, nor an absolute truth.

### *Credibility*

Beck (1993), as cited in Koch and Harrington (1998), defines credibility as the vividness and faithfulness to the description of the phenomenon. This is its "truth-value" (Leonard, 1989). Sandelowski (1986) says: "A qualitative study is credible when it presents such faithful descriptions or interpretations of a human experience that the people having that experience would immediately recognize it from those descriptions or interpretations as their own" (p.30). Koch and Harrington (1998) also suggest that if the reader can easily "travel through the world of the participants and the makers of the text [the researchers], they can decide for themselves if the text is 'believable or plausible' [their terms for rigour]" (p. 882). The reader's ability to travel through the world of the participants has been increased through the inclusion of verbatim data excerpts and, through my world, by the inclusion of my own reflections. The research is also credible because all of the participants, as well as myself, are qualified psychotherapists or counsellors who have close personal knowledge of the experience I am studying. Credibility may also be increased by the verification of the data through returning the research to the participants. The participants were invited to review their transcripts and change them if they wished. Only one person asked for their transcript. Credibility overlaps in some ways with auditability.

### ***Auditability***

Auditability is demonstrated through clear articulation of the methodology and method. This means that the reader is able to comprehend the researcher's steps in arriving at the final interpretation. Beck (1993), as cited in Koch and Harrington (1998), says "auditability refers to the decisions made by the researcher at every stage of the research process" (p. 886). I outlined the process of my decisions, taped all the interviews and created transcripts of each, recorded memos of my process and show reflexivity in relation to these and within the thesis itself.

### ***Transferability / fittingness***

Beck (1993), as cited in Koch and Harrington (1998), says 'fittingness' is possible when data can fit into a context other than the one in which they were generated. Such fittingness expresses the transferability of the data and will be shown through providing sufficient contextual information and analysis to allow the reader to make comparisons to other situations. Many descriptions of the lived experience were common to all of the participants' stories, in particular the mental and emotional conditions that are most suitable for the phenomena to occur. There were also considerable similarities, as well as distinct differences, in the meanings made of the experience, especially within cultures. I, therefore, believe that many aspects of the experience and meanings are transferable.

### ***Sense of sufficiency***

Reaching saturation means that after a certain stage no new data is forthcoming. While I think this study would have benefited from a higher number of interviewees than eight, I also felt that by the eighth interview I was not noticing new themes emerging and I felt a sense of sufficiency in relation to the data (Colaizzi, 1978). Despite the constraints imposed by Masters research, I believe the data is sufficiently rich to demonstrate the themes.

## CHAPTER 4: THEMES OF THE FINDINGS

The data will be presented, using excerpts from the interviews, under themes that capture the essences of the lived experiences, and the interpretations made of the experiences. Aliases are used in order to give the excerpts a personal tone and to enable readers to remember and connect the different speakers between themes. The findings are presented thematically as follows:

### Experiencing ‘inexplicable’ phenomena.

This theme takes readers into the stories of many different types of inexplicable phenomena. It is divided into several sections called: knowing through action; knowing mentally; seeing ineffable forms; communicating with multi-sensual forms; and feeling others’ experiences.

### Being open.

This theme describes the lived experience of psychotherapists’ and counsellors’ states of consciousness, at the times that the inexplicable experiences occurred.

### Being attuned to something more.

This theme reveals the differences, as well as the similarities, between the meanings made of these experiences. Differences between Maori and Pakeha meanings are particularly highlighted.

## **Experiencing inexplicable phenomena**

In this section, participants describe many different sorts of experiences in which they appear to know things which the Cartesian world-view of linear time and three dimensional space tells us it is not possible for us to know or perceive.

### ***Knowing through action***

One way in which it seems possible to ‘know’ about events which have happened to clients, without any physical or verbal contact with them, is to act in ways which later

seem to have a close connection with a client's experience or distress. This may be conscious or unconscious.

Margaret tells the following story:

*I felt an intuitive impulse to do something that I wouldn't have normally have done and I simply got up and opened the door onto the deck and I went out and picked the one rose that was there and I brought it back in and said to her [my client] "I'd like you to have this". And she just burst into tears and said to me: "I just dreamt that you did that". I was sort of taken aback and thought, "Good gracious. How extraordinary"!*

When asked to think about her response further, Margaret reflects on her process in a more conceptual way.

*The idea came into my mind and, like I usually do, I don't just enact immediately. I let myself feel what I feel and test it within me. I just run it past both my heart and my head, before I simply act, but the impulse seemed insistent. It wasn't inconsistent with my head, so I just gave myself permission to act on it. I didn't think that it would be counter-productive. It is important to me that I test it, that it's both conscious and unconscious.*

Margaret remembers feeling an 'intuitive impulse', which seems inexplicable because the impulse is to do something she would not normally have done. When she connects the word intuitive to the word impulse she conveys a sense of the impulse having a meaning that she did not yet know. The concise Oxford dictionary defines intuition as the "immediate apprehension by the mind or sense without reasoning" (Sykes, 1982). Intuition is also often used to refer to an immediacy of knowing that is insightful of meaning. However, Margaret does not use the word intuitive to refer to either an immediate knowing of, or insight about something, but rather as a feeling that the impulse seems meaningful in a way that she did not grasp at the time. The 'idea' to 'do' something appears suddenly, as if from nowhere, so it is surprising. Margaret describes the impulse as "insistent". It seems to have an intention, which she does not understand. The insistence of the impulse, which seems to be telling her to do something she would not normally do, gives the impression that she feels it is not entirely her own. Because of her lack of clarity about its purpose, and her concern that

this is not normal psychotherapy practice, Margaret feels it is important not to act on it without consideration and so tests the idea on a conscious level before deciding to trust it. However, although she does not have a sense of what will happen if she does act on her impulse, she trusts her 'intuition' enough to follow it without knowing. In this way she acts on faith. But what seems extraordinary is that following this impulse seemingly leads Margaret to enact her client's previous dream. It is not that she suddenly cognitively knows what her client dreamt. It is as if her body knows and tells her in the form of an impulse to give her client a rose. When she hands her client the rose, Margaret's client bursts into tears.

*I don't think I've seen the tears well up in such a totally connected way before - it's like she knew that I somehow understood her, without her even having to tell me.*

Margaret is clearly excited and delighted by this. She feels a sense of awe and wonderment about this coincidental happening, which she cannot explain, but which has created a deep sense of emotional connection with her client and strengthened her faith in her intuition.

The next story occurred as Paula, who works at her home, was waiting for a client who is late for an appointment.

*I wandered around waiting for this client to come to therapy and I find myself opening the freezer door, in our kitchen at work, and looking for ice. And I'm thinking yep, we've got an ice-tray. I've never looked in there before. I just close the freezer door and don't think anything of it and wander off. Then I go upstairs, we've got a bathroom upstairs. I wander in there and find a flannel. Now I don't need a flannel but I notice there's a flannel there. I've never noticed one before and I thought: "OK". I don't even think there's anything weird about what I'm doing. That's the weird bit, how natural it is. And then the client arrives late as she had had an accident, quite a severe accident but not severe enough for her to cancel the appointment. She came in, in a state of shock, so immediately I took her to the therapy room and ran and got ice, got the flannel, threw the flannel in a bag of ice and got the flannel on her leg where the*

*bruising was starting to come up without a moment wasted. That kind of 'knowing' happens for me all the time, that's normal for me.*

Paula is not conscious of the fact that her client has had an accident but she wanders the house noticing the positions of certain items. The words, "I find myself" suggest that she feels she is being moved by something else, that she is not consciously choosing to act. However, when her client arrives bleeding, Paula spontaneously rushes to get the flannel and ice. It is then that she realizes that she had only just noticed those items and it occurs to her that there was something odd about having noticed items which she may have often overlooked before. It seems as if her body, or her whole being, somehow knew that they were to become important. This was not a cognitive knowing. Paula uses the word "weird" to convey the surprise and strangeness she experienced. The concise Oxford dictionary defines the word 'weird' as meaning "queer, odd, strange, and incomprehensible" but also as "supernatural, uncanny or unearthly" (Sykes, 1982). Paula's use of the word 'weird' conveys not only the strangeness of the experience but also that she feels it might be supernatural. She also reports that such experiences are not uncommon for her.

### Summary.

Both Margaret and Paula's stories seem extraordinary, strange and wonderful in that their actions seem to be closely related to events that their clients report experiencing, and their seeming 'knowings' about these events are not conscious but embodied and acted out. Not only are these apparent 'knowings' not conscious, but also they are outside the range of what is usually considered possible to perceive i.e. there was no physical or verbal contact between the therapist and the client about the events. Because of this inexplicability, the experiences seem weird, uncanny or supernatural. However, they also seem wonderful because they lead to connections with the clients involved that are healing and deeply intimate. Furthermore they raise questions about what it is to know.

## *Knowing mentally*

Sometimes knowings about clients' unexpressed thoughts or intentions appear in a more consciously cognitive way.

John experiences a sentence coming to mind, which he later describes as having "heaps of meaning" for his client.

*It came as a sentence, it was very specific: "Leave the boy alone", with letters at the beginning and end, very clear. It just came out of nowhere, it just appeared for me. But what is most interesting is that what he was telling me, even in all previous sessions, had nothing to do with what came out in that sentence.*

John's description of the sentence as having letters at the beginning and the end suggests that he was seeing the sentence in written form. The suddenness of the appearance of this sentence and its discontinuity from what had been talked about in the session strikes John as different from a usual idea or thought, even before he knows it has meaning for his client. However, the sentence is also different from an intuitive understanding of meaning. In fact, it did not mean anything to John. I notice his surprise and delight that he can seem to pick up information from "nowhere", which turns out to be very meaningful to his client.

Gary recalls 'knowing' when a client is about to phone him, on several occasions. He speaks generally when he says:

*I can't do it deliberately. If I think to myself: "I will think of this client" I can guarantee they won't phone. Somehow they just pop into my mind then later I can think: "Ahh, I haven't heard from them in a while" and I'm totally surprised. The quality of it is so elusive and so ineffable.*

Gary's story conveys the characteristic sense of surprise about a 'knowing' appearing out of nowhere and of being outside the control of his will. In fact, he not only feels he can't make it happen but that he can "guarantee" that it will never happen if he tries to will it. In this way he seems to be describing something that is not only illusive and ineffable, but also rebellious, like a trickster. It never happens if he tries to will it. An image of a wild animal avoiding capture comes to mind. His use of the words elusive

and ineffable seems to describe the quality of the experience well. The concise Oxford dictionary defines ineffable as “unutterable, too great for description in words” and elusive as “escaping from a person’s grasp or understanding” (Sykes, 1982). These words also convey the sense of inexplicability and indescribability Gary feels when he tries to tell of his experiences. This sort of knowing, again, is not an intuitive perceiving of meaning, but rather a premonitory knowing of an event that had not yet happened.

### Summary

The seemingly close match between the mental events and the later revelation of their significance to another suggests that these occurrences are not simply ‘ideas’, created by the individual therapists’ and counsellors’ imaginations. They are knowings about things that have taken place in another time or place, and for another person. As with the previous examples, the therapists and counsellors have no way of having access to the information with their five physical senses in the usual way. The experiences are surprising, exciting and astonishing because they are inexplicable.

### ***Seeing changes in clients’ appearances***

Another inexplicable experience is that of seeing changes in a client’s visual appearance that seems to have a semi-solid quality. This creates doubt in participants about whether they can trust their perceptions. Sometimes the visions also convey information about what a client is about to speak of, ahead of time.

Joanne tells several stories in which she sees changes in the appearance of two different clients, which seem to herald what the client is about to speak about:

*A female client was sitting in the chair and she looked like she’d been painted, like the whole texture of her skin was like paint, like a textured painting, very thick textured paint. Then, after I had this image of her, she started speaking about her grandmother’s painting above the fireplace.*

*I became aware of this energy, a visual change in appearance and she suddenly looked very young, she looked like a young boy, with short hair. She started to look very small in the chair and said: “When I was ten years old I cut off my hair and wanted to be a boy”.*

Although she describes seeing changes in her client's appearance, Joanne's use of the words "she looked like she'd been painted", suggests that she does not fully believe her client is painted, i.e. what she sees has an 'as if' quality. However, she is also clear that what she sees is not an imagining. She explains:

*It's not in my mind it's actually a visual thing.*

This correspondence between what she sees and what the client then talks about also makes her wonder about whether what she is seeing is a form of unconscious, symbolic communication from the client, rather than just something she has mentally created or hallucinated. Again her knowings are not insights or intuitions of meaning. They also create a sense of seeing or knowing of the client in a more intense and vivid way, which feels deep and emotionally connected. Joanne says:

*It's like I can see her intensely and I'm very aware of her. She wasn't looking at me, but within herself as she was talking, but there's a sense of deep connection.*

As others have described, Joanne seems to experience a barrier being removed. This creates a feeling of emotional closeness and intimate connection and of seeing, or knowing, her clients in a more intimate way.

Joanne describes:

*A lot of intensity in the session, it's almost like I can start to see vague definition. It's sort of like energy stuff, almost an energy field. It's more light, very light, a lot of bright sort of glow around someone, rather than an aura with colours or anything like that. I know that if there's a lot of intensity in the room, and if I kind of focus a bit off, this happens. I have read a couple of books, just out of curiosity, on auras or energy fields and they basically were saying if you do focus in that way you become aware of it.*

Again I notice the shift in her focus. Joanne senses changes in the energy in the room in quite a palpable way, seeing a glow around her client, almost like a visual energy field. This is not in the range of normal perception; it requires a slight shift of focus. Joanne sounds embarrassed when she describes reading about auras "just out of

curiosity”, perhaps because the word “aura” is outside the acceptable frame of psychodynamic psychotherapy language. She goes on to say:

*I remember mentioning it once to a psychiatrist and he scoffed at me so I've never really talked about it since.*

Joanne is not the only participant who has had a shaming response when she tried to discuss her experiences with her supervisor. The fear of being scoffed at in this way has put her off discussing her experiences again.

Gary describes a repeated visual occurrence with a particular client:

*I would look at him and see a face other than his. It was a woman's face, a woman, I'd say in her 30s, a face that did not look particularly similar to his, there was quite a marked difference and if someone had shown me a photo and said this was his mother I'd be slightly surprised but not disbelieving. It was a very strong experience and I had to blink repeatedly and look away and it didn't go away. It didn't feel like it was in my head it didn't particularly feel like it was in the air between him and me. It was actually, an actual change in his face. He looked different. The nearest thing I've seen to it was going to see a performance where a woman had slides of other people projected onto her and so it was this peculiar quality that it was both not his face but on his face. It had a very strange quality to it.*

Gary also sees an apparent change in his client's physical appearance. He differentiates this from an image he might see hanging in the air, like an apparition, and from an image he might imagine in his mind. What he sees is less dense than matter usually appears. He likens the image of the woman's face to a super-imposition of a film image over another's face. This conveys a transparency or ghost-like quality to his vision. Indeed Gary wonders if it was a ghost. He also describes the image of the face as having human qualities of form and age, as if it is another person rather than just an image. He uses the words “strange” and “peculiar” in a way that implies odd and unfamiliar. Gary's immediate response is to want it to go away. However, he finds that he can't will it away.

*I couldn't shut it off and the things that I did to dispel it, looking away and back and so forth, definitely contributed to taking my attention away from the client, what he was saying and what was going on between us.*

*I didn't feel worried or frightened or startled but it was surprising, it was something about the concreteness of it. It had that sort of hallucination strength, which meant I wasn't scared of it, but I was puzzled and surprised by the force of it.*

Gary initially blinks and looks away, in an attempt to dispel the image, rather than to test its validity. Perhaps this is because he assumes that it is a temporary illusion and because he finds it takes his attention away from his client. However, when he tries to will it away, he discovers that the image is not under the control of his will. It appears to have a force and a life its own. When he describes it as having 'hallucinatory strength', he is indicating that it he is considering the possibility that he is hallucinating. However, there is something about the 'concreteness' of it that means that, although he feels surprised, Gary does not feel as worried or frightened as he might have expected although he does not know what to make of it, except as symbolic expression of his client's hiding behind his mother. After this experience Gary, like others, experiences a special connection to the client that goes beyond knowing each other in a factual way.

*There was some sense of connection between us that was not just simply what we could know of each other.*

Like many of the other participants, this leads Gary to experience a more intimate knowing of his client.

### Summary

Both Gary and Joanne see subtle changes in their client's visual appearances that they can distinctly differentiate from something imaginary or inside their minds. The experience is one of surprise and a sense of weirdness or strangeness.

None of the participants expressed any fear. Although Joanna's experiences led to her pre-cognitively knowing what her client was about to talk about, Gary's experience

did not. However, both Gary and Joanne refer to the close intimate connection they feel with their clients after these experiences. They also wonder about the possibility that they are receiving unconscious communications from their clients that is conveyed in visual form.

### ***Communicating with multi-sensual moving forms***

One form of inexplicable phenomena is seeing 'whole scenes', in which forms, which appear as people, move and interact. Sometimes it is possible to communicate with these 'people'. Such experiences involve all the senses except touch. All the Maori and one Pakeha participant experienced these things.

Mere tells of her experience while working in a group of Maori healers.

*As I was sitting there, watching this guy being healed, I saw something that really surprised me. I saw the man as a young boy, about two or three year old boy with his father, walking away on a country dirt road. Then two other ladies that were in a circle said they'd seen the same thing but I still couldn't believe that that's exactly what I saw. But to be confirmed by the two ladies, that they saw exactly the same thing. From then on, I seemed to have had a bit of that gift, to be able to heal somebody.*

After her initial surprise at what she sees, Mere is even more surprised to find that two others in the room seem to see the same thing. Mere was the only participant in this research to see inexplicable phenomena in the presence of other people. The ascertaining of a consensual reality enables Mere to believe that what she sees is real in some way, even though not everyone in the room can see it. Some mutual validation is enough to make her feel that what she is seeing is not simply imaginary. It is clear from the conversation that Mere has come to understand, from the Maori worldview, that what she sees are spirit forms. Over time, Mere has become more confident in her understanding of what she sees because her perceptions have been shared, and so confirmed, many times by others seeing the same things.

*I know it's in the spiritual world.*

The reason that not everyone sees them is explained by her belief that messages are sent from “Spirit” to some people only. Mere uses the word spirit in two ways: to refer to a sense of greater ancestral ‘Spirit’ (Wairua) who has a purpose to help those still living and also to ‘spirits’ (kehua) which take an individual human form which she can see. Referring to the Great Spirit she says he says:

*It may want me to give a message out.*

For her spirit forms are not just things that may appear after someone is dead. The man she is healing in this story is alive.

*It’s very hard to explain, but that little boy is him. You don’t have to be passed on to be in spirit.*

Mere also speaks more generally about what she sees or senses when she feels that a spirit is coming to her:

*I know when someone is coming to me, because sometimes it appears like a cloud, like a mist and then I concentrate on that mist and then it would become a figure, or sometimes words. I used to smell this beautiful smell. It was like cologne and it was always in the same place at home. And another time it was chewing tobacco.*

*It’s hard to explain... it’s like, it’s like being on the telephone, but you hear so many voices. They appear as a real person, like I’m looking at you, in a shape, the colours of what they were. It’s a real person but I just know they’re in the spiritual world.*

Mere describes the emergence of an image, a human form or words, from a cloud, which is at first murky but if she pays attention it becomes clearer. She uses sight, hearing and smell to sense the presence of someone, who is “in spirit”, and speaks of the ‘spirit’ as looking just as people do. She explains, *like I’m looking at you*. Yet somehow she ‘knows’ that they are in spirit. She also likens the hearing of spirit voices to being on the telephone with lots of voices speaking at once. It is clear she hears the voices as coming from outside not inside her head. Because she has come to understand this within the Maori worldview she feels comfortable with this. The scene Mere sees is active rather than static. The people in the scenes appear to have a life of

their own. She does not believe that she is creating these scenes imaginatively. Mere, like other participants, believes that her knowings are communications from another realm of knowledge.

Rangi, a Maori counsellor, tells of a situation in which she negotiated with a 'spirit' on behalf of a client, in order to change something in the 'physical realm'. Although Rangi cannot see 'spirits' herself, she can hear and speak to them and works in conjunction with another woman who can 'see'.

*We had a boy feeling the physical manifestation of something that was exerted in the spiritual realms, which was called up by someone in the family on the physical level. This old man (a kaumatua in spirit) had been caught in that process, not knowing the full justification. So I went and I got my girlfriend and we had a session. Her job was to see and my job was to talk to this old man (in spirit). He had done a karakia and sent it out not realising that the family wanted something quite vicious, and so what we had to do was talk to the old man and try and redress the situation.*

Rangi speaks of this as something she does in an ordinary day's work, as she might negotiate with a living person. She clearly acts as if such influence can be reciprocal and real between the living and the dead. Although she knows these experiences are not exclusive to Maori, she knows that this may sound strange to me. She, like others, expresses fear of being ridiculed if she talks openly about such things.

*I'm not saying that Pakeha don't understand this. Where do you talk about it? It's taken me a few years to get to this point where I can talk openly (with a group she works with) about the things that I've seen or I've experienced and had an absolute knowing. I didn't want to be laughed at - I'm a counsellor for goodness' sake, it's my reputation, I mean it's my job. I mean there is a part of me that had to seriously think about okay somebody one day is gonna talk about a session and say, that lady is really odd, she was saying things that I don't understand how she could have known.*

Like Mere, it has taken time for Rangi to trust her experiences as absolute knowings and to believe that her experiences are meaningful and real. It has taken her a long

time to feel confident in speaking about her experience openly because she has been afraid for her reputation. It is very important for her to have people with whom she can share such experiences. A turning point came when she realized that, unless she did find a way to work with these experiences, she was wasting her time trying to help Maori clients who experienced such things.

*When I came into counselling for Maori I realized I was wasting my time doing a very European western style of counselling cos it would not help my people who see these things, who hear all these things, and taste these things, who smell these things cos that's what they do. I have to engage with that.*

While still holding on to the possibility that these experiences are not externally 'real', Rangi comes to the conclusion that keeping an open mind and engaging with her clients' experiences as 'real' is the best way to work with them and that a pathologising Pakeha approach is not going to help.

### Summary

The consensual validation of the Maori worldview and shared experience with others supports Maori counsellors and therapists to be more open to experiences of interactions with the ancestral spirit world. Although Maori initially express doubt about their perceptions more often than Pakeha, they have come to trust that what they experience are 'knowings' about a real spirit world that exists outside them. Despite the support of the Maori worldview and friends, some also fear for their reputations especially if they speak openly about these things to Pakeha. They believe, however, that it is very important when working with Maori that these things are taken seriously.

### ***Feeling others' experiences***

Experiencing bodily sensations or emotions, or physically and visually experiencing whole scenes in dreams that seem to belong to clients is another form of inexplicable phenomena. Unlike other experiences, these bodily/ emotional experiences are sometimes uncomfortable and invasive. Margaret provides an example:

*He [the client] did talk about it, but it wasn't congruent, and there were no obvious feelings. And, as he did that, the feeling I got, it was like it welled up in me, from my gut up towards my throat, was intense sadness. Ugh [shudder]. As I usually do, I just let myself feel that experience and suss it through, "is this something that's more mine than his"? I decided, no it wasn't, that the way he was talking, the feeling I was having was projective identification, that he could not quite tolerate it yet, but that was coming.*

As Margaret listens to her client speak, she begins to feel intensely uncomfortable. The welling-up of the sadness, which she has not previously been feeling, comes out of the blue and feels invasive. It does not seem to belong somehow. Her response is to try to make sense of this experience and so asks herself whether she recognizes the feelings as her own. Because she does not recognize it as related to her own emotional state, she decides it is projective identification. Projective identification is an analytical term often used to refer to the therapist's response to a client projecting intolerable parts of him/herself into her or him (Ogden, 1979). This gives Margaret a framework with which she interprets what she is experiencing. Such bodily-emotional sensing is not considered unusual in the psychotherapy world. However, although this is not unfamiliar, there is still a sense of mystery and awe about how being flooded with emotions that do not appear to be her own. This feels surprising as well as invasive.

Paula remembers waking up one morning after an uncomfortable and intrusive dream about one of her clients.

*I had an early morning dream and I woke up immediately after it and I just knew it wasn't mine, and I knew it was his. He'd been in it and I didn't like the force with which it had entered my psychic world, the inter-psychic world, but it was the force of what happened. In it he had been in a garage and he had been raped, as a little boy. It was like he gave me his whole, in projective identification sense I think, but it was during my sleeping time, not in a session.*

Paula goes on to describe how her client, later, speaks of the very scene she has envisioned in her dream. She describes a strong sense of 'knowing' that the experience is not hers. Yet I sense some doubt. She questions whether the dreams are created from her own psychic material yet she also knows herself well and feels able to

distinguish. Like Margaret, she interprets her experience as projective identification. This validates the possibility that the dream material belongs to her clients rather than herself. Ogden (2001) suggests that: “It is no longer self evident what we mean when we speak of the analysts or the analysands “own” feelings or even the patients “own” dreams and dream associations” (p. 20). The astonishment about this is evident in Paula’s voice. The accuracy of the matching of the detail between the scenes, although uncomfortable, is exciting to Paula.

### Summary

Although they question their interpretations, both Margaret and Paula have a strong sense that they have experienced something belonging to their clients. In Margaret’s case, the client is in the room and in Paula’s case the client is not, however, both believe the experiences to be meaningful because of the coincidence between their experiences and what their clients later express. The embodied intensity of the experiences means that they believe they are feeling another person’s experience in a non-verbal and very real way. The natures of the sensations, which seem to correspond to others’ rather than their own lives, suggest to the therapists that they are experiencing feelings that belong to another person.

## Being open

Immediately prior to the experience, many of the participants describe a feeling of spaciousness, receptivity or awaiting something and yet not knowing what. They are also aware of feeling empty, rather than full, of thoughts or feelings. Some describe this as being in a “meditative state”. Participants also describe noticing a heightened sensitivity to the “atmosphere” and a change in their awareness of time and space. Some describe time as being slowed down while others experience a feeling of timelessness or a sense that the future and past seems available all at once.

John says:

*In terms of what was happening internally, pretty much nothing was happening. While I was listening to him [the client] I didn't have any sensations, any reactions, any, any of what you would call counter-transference. There was a sense of space, I was very much feeling, sort of absorbing all of it, sort of letting through, rather than absorbing or keeping.*

When John says ‘nothing much was happening’, he means he was not aware of any sensations, reactions, feelings or thoughts in relationship to his client. What he is aware of is not some ‘thing’, but space. In using the phrase “there was a sense of space”, he is not using “sense” in the same way as we might speak of sensing something in the world with our eyes, ears, noses, hands or tongues. His sensing seems more total, as if he is using his whole being and conveys a sense of readiness for the possibility of something appearing in the space. The space feels extended and as if it is both inside and outside him and paradoxical, as if it has a quality of both presence and absence. Bachelard (1969) suggests, “If we could analyse the impressions and images of immensity, we should soon enter into a region of the purest sort of phenomenology - a phenomenology without phenomena” (p.184). While John is listening to his client he is ‘letting it through’. By ‘it’ he means the words his client is speaking as well as the feelings or thoughts, which spontaneously occur to him, as he listens. Although he is not dwelling on any particular thing, he is, nevertheless, listening for something. He speaks of feelings and thoughts as coming and going. They are not under his control. It is as if he experiences himself as being a place where

things happen. This reminds me of Levi-Straus (1995) saying: “There is no ‘I’, no ‘me’. Each of us is a kind of crossroads where things happen” (Intro). He is passive and yet open to something new emerging, which is as yet unknown. John describes this state of consciousness as enabling him to become in touch with ‘knowledge’ that is there all the time, but which he would not usually be able to ‘access’.

*The way I describe these situations is that the knowledge and this being part of the knowledge that is there all the time, when I say there, I mean accessible to us. It isn't a place or a time. It's not a location, it's what it is when you remove the obstacle of ourselves, our lower selves, our ego, to become in touch with the knowledge.*

He describes this as:

*When I was out of the way. It's just that I am not always in tune, not always in that space of freedom from my own personal reactions. Transparency, that's a good word.*

John makes it clear that though he uses a spatial word like “there” he does not mean it as a place but rather it is something he feels in tune with, when the obstacle of his ‘lower self’ is removed. When John uses the word ‘transparent’ and ‘removing the obstacle of his lower self’, I get the sense he is speaking about being in a state in which he lacks the self-consciousness, which usually creates a barrier or separateness between him and the world. At the times, when he feels transparent he feels a part of or in tune with ‘the knowledge’, he experiences this as something which exists independently of him and is not his own. This feeling of transparency and loss of barrier between himself and the world brings a shift in perception of space to one where inside and outside is not so clearly defined. Although John says he cannot always achieve this state, such experiences are also quite frequent and natural.

Paula uses the words “altered state” to describe her feeling state as she waits for a client to come to a session:

*I think I go into a slightly altered state before someone arrives, but I don't do it deliberately but I'm thinking about the client. I'm preparing myself for them, I open myself to them, before they come, so any musings I have reveries, kind of*

*musings - they kind of float past, above my head. The thoughts are not in my brain, it's atmospheric. It's as if I'm thinking out there, not just inside my brain - so I will pluck the thought. It's like trying to remember a dream. That's a good analogy. You know if you concentrate on a dream, it goes away, and if you really want to remember it, you can't, but if you don't try too hard but go into a slight non-attentive state you can get it.*

Paula describes a shift in her consciousness to one in which she feels 'open' to her clients. Although she does not will the state to happen, she is aware that she is preparing herself for her clients, mentally, by listening for any thoughts and feelings that might give her some sense of her clients, before they arrive. Moving into a slight non-attentive state, which she calls a 'reverie', is part of this opening. "Reverie" is a word commonly used by psychotherapists, which refers to the famous work of Wilfred Bion, who described it as "a state of calm receptiveness" or an "alpha" state (Hinshelwood, 1989, p. 420). What comes, she says, are "musings that float above my head". The word musings is associated with the Greek idea of the Muses who have been referred to by poets. The concise Oxford dictionary defines 'muse' as: (noun) "inspiring poetry, music and drama" or (verb) "gaze meditatively" (Sykes, 1982). This seems to accord with Paula's description. Paula experiences these musings as floating and outside, not created by her, as if they have an ethereal life of their own. She likens them to dream images, fleeting and hard to capture or grasp conceptually. Paula's metaphor of trying to grasp them as being like remembering a dream conveys the similarity she experiences between dreaming and this kind of thinking which is different to cognitive rational thinking. Bachelard (1969) says: "One might say that daydream is the original contemplation" (p.184).

Paula's feeling that thoughts are floating past outside her head accords with her view of the unconscious mind that is neither located in time nor discretely in herself and her client but rather is in the space between them and can be entered into, in some sense. She says:

*There's their unconscious and there's my unconscious and I guess what I'm saying is I allow my self to enter, as much as is possible, the unconscious between us.*

She also says:

*There is no time in certain states of consciousness. I've very strong experiences of that – in meditation and altered states of consciousness.*

Both Paula and John describe a lack of self-consciousness and convey a sense that thoughts seem to appear from the 'atmosphere' or from 'nowhere', although, logically, it may seem impossible for thoughts or knowledge to be disembodied. They experience this as picking up 'information' or 'knowledge', which is in the atmosphere or in the space between them and their clients, which can be accessed or entered into. For both John and Paula, the lived experience of this is very real.

Gary also refers to being in an "altered state of consciousness" and in likening this to the state he feels in when he meditates:

*There is something about the altered state of conscious that I know I get into when I'm practising therapy, as when I'm doing my meditation. So, in that way, I think of it as a spiritual practice.*

For Gary, this is different from his usual consciousness, rather like a meditative state, which he likens to his spiritual practice. He also conveys a sense of waiting, of being receptive and present to whatever may come.

Joanne particularly notices a change in her awareness of the atmosphere, a change in her experience of time and an increase in the intensity of her attention

*There was a very heightened sense of awareness, and everything seems slowed down. It's like I can see her intensely and I'm very aware of her [the client].*

Joanne's description echoes the other participants' experiences.

Rangi speaks in the second person when she describes an experience of timelessness when accessing what she believes to be 'spirit realms'.

*Your head is absolutely empty of everything but you are absolutely aware of where you are. Time doesn't exist over there but it does here. So everything you know, that idea of time - past present and future - existing, co-existing or existing at once but because we live in a physical reality we cannot*

*conceptualise that statement but it exists, for those who are capable of perceiving or penetrating.*

Rangi's description conveys a similar sense of heightened awareness, timelessness and the not thinking of anything particular described by others. She refers to "over there" as if it is another world where the boundaries between things, that are separated in everyday perception, time, space, the dead and the living are, somehow, all together and present at once. She emphasises that although it is difficult to conceptualise this, in physical terms, as a lived experience, it exists for her and others who can perceive or penetrate it. When she uses the word "exist", she seems to be saying the experiences of these things have an experiential reality.

### Summary

Part of being open or being in an 'altered state' seems to be feeling a heightened sensitivity to the surrounding atmosphere, or space, and lessening of self-consciousness. In an ordinary sense there is nothing happening to which the participants bring their attention. However, by being present in the way that they are, and paying attention to nothing in particular, in an unfocused way, something changes in their consciousness which seems to involve experiencing time and space differently. Time is described as either not existing, being slowed down, or as existing all at once. The sense of separateness from the world in a spatial sense also diminishes. This feels like moving into another realm or dimension, or as the removal of a barrier such that what is inside and outside becomes less clear.

Describing experiences that are different from the everyday perceptions of linear clock time and three-dimensional space, in which things are clearly separated out from other things, is difficult. Participants try to use spatial concepts to convey non-spatial experiences that are almost impossible to conceptualise. This may be because lived space, body and time are experiences that we feel and are largely preverbal (van Manen, 1990). Heidegger (1969) refers to the lived experience, in which time and space are not separate as being in the four-dimensional realm of "time-space". He says: "Time-space no longer means merely the distance between two now-points of

calculated time... Time-space is now the name for the openness which opens up in the mutual self-extending of future approach, past and present” (p.14).

There is a lot of similarity in the experiences of the states of consciousness described by the participants. However, not only do the timelessness and loss of spatial boundaries feel very real, but experiences also occur in which participants seem to be able to know or see things, about other times and places which they would not usually be able to perceive. Chirban (2000) calls these “oneness” experiences and suggests that: “It is in this experience in the present moment, characterised by timelessness and lack of self-consciousness, that oneness facilitates the ‘sudden gift of vision’ and self-integration spoken about by meditators, artists, lovers and poets” (p.11).

### **Being attuned to something more**

Although many different meanings are made of the many different types of experiences, they universally seem to evoke a sense that they involve something other than the therapists’ or counsellors’ conscious self. The phenomena seem to have a life of their own, which suggests an intelligence, energy and intention. Some conceptualize this as the ‘unconscious mind’, which ‘sends messages’. Others envision a realm of ‘knowledge’, which can be ‘tuned-in to’. Some understand this as ‘ancestral spirits’ sending messages and, still others, as the presence of God.

The stories also reveal distinct differences between Maori and Pakeha interpretations. Mere has come to understand that the forms she sees, the voices she hears, and the smells that appear from nowhere are signs of ancestral spirits or the ‘great Spirit’ wanting to communicate with her, so that she can heal or pass on a message to someone. Her understanding derives from having her experiences validated both by others in her healing group and from the Maori worldview about the survival of ancestral spirits.

*If there is a message from that person, it will let me know, it will let me know if it has to come through me to get to that person. Or it may want me to give a message out, because of how I am, with that knowledge and gift.*

Mere is speaking of herself as a medium, which is a person through whom ‘Spirit’ can ‘come’, in order to give a message to someone. She also understands that these messages are ‘given’ to her, and to some others, but not to everyone. She believes this happens to her because she has a “gift”, of being able to see or hear. She often sees whole scenes that give her information, which she can use for healing someone. Her use of the word “gift” suggests she feels special and privileged to be the medium for something important.

Mahina also believes that ‘spirits’ are communicating with her.

*I suppose what I do is just relax and allow whatever it is to say whatever it is to whoever is there - and allow that. I can still think separately and have my own thoughts but the voice and the breathing. So somehow I suppose my relationship, my faith to the spiritual realms, I see that as being a lot of my role, what my potential is. And it's purely the spiritual realm utilizing that, which has been created to do that. What I have found is that when I allow that, the tupuna or whoever is guiding the process, know what they are doing. And I have never freaked anybody out. Most of the time people weep because it's their nanny or someone telling them something they needed to know.*

Mahina expresses a sense of being used as a medium for a spiritual purpose and that tupuna (ancestors) are guiding the process. She describes how she is able to think separately and still be conscious during this process. Yet there is a sense of being taken over by something else, which she trusts. It is part of her faith and her belief in the survival and care-taking involvement of ancestral spirits.

Rangi describes the capacity to ‘tune into’ or perceive ‘spirits’ of the dead:

*We're having to work multi-dimensionally, you have to know the layers. 'Dimensional realities' is what I call it. It depends on being able to perceive or penetrate a level, so it all depends on your own vibrational field. We're seeing our world in a physical reality, we're sitting on a chair we can touch the table, it's solid it has – it's made of matter, but all these other realities exist too, they have a form but it's not as a physical form, but they do exist, they co-exist and that's the difficult thing. Oh it is real, the smell everything, they've got everything you know. The only thing is you can't touch them.*

Rangi uses the language of attunement, and other dimensions, in which past, present and future can all exist at once, to express how she envisions the possibility that ancestral spirits interact with living people and vice versa. Her sense of smell tells her they are real.

Like others, she feels that she is a channel to the ‘Spirit’. She describes this as being ‘in the flow of God’. Aware of the possible doubts she, others or I might express about the “reality” of these experiences, she emphasises that she is not imagining, or lying about her experience.

*I wouldn't make it up as a scenario. It's not making up, when you're in the flow of God or of the energy of God. I guess that's the only word I can use right now. It's like being a channel I suppose, I don't know, but it's there, you know.*

Maori interpretations of these experiences invariably involve the participation of ancestral spirits. The descriptions in this study are noticeably consistent and are congruent with the traditional Maori view that the wairua of ancestors is believed to visit living people, often communicating via a medium through whom an ancestor can act as a guardian of the living relatives (Orbell, 1995). All of the Maori participants believe themselves to be channels or mediums because they have a gift for these experiences. They do not believe their powers are their own, rather that the knowledge is given to them, or comes through them, from a greater spiritual realm.

Pakeha also experience a similar sense of being a channel to messages although, as a psychodynamic psychotherapist, Paula interprets these as messages from the client's unconscious and believes that her clients are sending messages through her dreams:

*I absolutely knew that they weren't my experiences. They were trying to get through to me what they didn't know themselves.*

Although she is suggesting that the clients send her messages, she does not believe they do this consciously. However, she is the one who is psychically available. She is the one who cares. Paula interprets her sense of receiving messages in terms of her belief in the existence of an unconscious aspect of the mind, which she believes is

intelligent and communicative. She mentions a particular theorist she has read, who speaks of field energy, which makes sense to her as it explains how she might be able to pick up information that might be transmitted in the form of a field.

*To me it's not just the transferential experience of an interpersonal dynamic –it has another dimension, which is - it's in the field, I do think about Loewalds' field energy. Sometimes I feel like I've got some sort of antenna that catch, metaphorically. It's like radar picking up a signal or something, but the difference is you don't use your five bodily senses. It's different, even though I think I use my nose. I'm not using my conscious brain. It is sort of having an openness to it.*

Paula uses a metaphor of having antennae with which she can attune to invisible information in the atmosphere, much like a television antennae attunes to radio waves, to imagine how she could sense information without using the five physical senses she would normally use if she were in the room with a client. Both the fields and antennae are scientific metaphors, which give Paula a way of envisaging how information can seem to be transmitted between two minds, thus validating her interpretation of her experience.

John does not interpret a sentence that appeared out of nowhere as being intentionally sent but rather believes that there is knowledge available to be accessed. He describes this as becoming: “*in touch with the knowledge that is there all the time. When I say there, I mean accessible to us. That knowledge is beyond space and time*”.

He also uses a language of attunement when he describes:

*It's just that I am not always in tune, not always in that space of freedom from my own personal reactions - but whenever I am without reaction then there is space for the knowledge to come through without my, my interference.*

Despite being a psychodynamic psychotherapist, John does not primarily move to an analytical interpretation of his sense of being able to access knowledge beyond time and space but a spiritual one. He uses the word Atama and explains

*Atama it is the word for God but it's different aspects than the way God is usually understood in western tradition. It's within and without. It is all there is, and beyond that, which is outside the intellectual sphere.*

Because, in John's understanding, God is not a personal force he does not envisage it as sending messages but as something that is everywhere and can be accessed by tuning into it. Nevertheless he refers to knowledge as 'coming through' as if it is active and moving. In this way he conveys an impression that he is a medium for knowledge that is coming through him because he is open to it and because he is there for the purpose of receiving that knowledge for his client.

Margaret also interprets her ability to know what her client is feeling or thinking in psychotherapy language as either an attunement on a physical level or a temporary loss of boundaries of the self:

*I am talking about attunement, which is much more than conscious identification with, it's cellular, bodily. It was a moment of merger, a harmonious interpenetrative mix-up. It's like the boundaries of what constitutes "I" for each person, which might be there at other times or in other contexts.*

The ideas of attunement and loss of boundaries of the self are in fact quite different and her lack of clarity reveals her struggle to find metaphors to make sense of and communicate her experience. When questioned about any non-psychotherapy understandings Margaret speaks of her belief that these experiences are a sign of God's presence in the therapeutic relationship.

*As in all of life, and there's always more in a relationship than this person and that person. It's like the container, or the holding of the relationship, was more than him and me. I understand it as God is life itself, and therefore there's the trans-ability of life to continue to emerge, to continue to create. The most effective therapies seem to involve, these dimensions, to do with the soul, to do with spirituality and humanity.*

## Summary

The participants' differing understandings seem to depend on the various cultural influences that each has had. These give them a way of making sense of their experiences. Such influences may be psychoanalytic ideas or spiritual beliefs. Spiritual groups and theoretical ideas provide a way of contextualising experiences in a meaningful form. They also constitute communities of people who share a consensual view of such experiences. Although Pakeha and Maori interpretations of meanings differ, all the therapists and counsellors interpret their experiences as a sign of involving something more than a transaction between themselves and their clients alone. Many describe an 'absolute knowing' that they are in relationship with a spiritual other or spiritual dimension, which is real and not imagined or created by themselves. There is a common sense that the experiences seem inexplicable and appear to have a life of their own. The emotional or physical intensity of the experiences makes them feel 'real'. Their embodiment and the accuracy of the knowings seem to lead the participants to believe that their interpretations are 'real' in an objective sense, even though they are aware that the objectivity of the experiences might be doubted by others.

## **Summary of findings**

Experiencing inexplicable phenomena while working with clients takes the following forms:

- Acting in a way, which later seems as if it has been in response to, or in preparation for, events that have happened to clients, but which the therapist had no obvious way of knowing about consciously.
- Knowing things, in a conscious coming to mind, about what clients were about to do or say, ahead of time.
- Hearing sentences, which seem unconnected to what has been spoken in therapy sessions, but are meaningful to clients.

- Seeing subtle visual changes in clients' appearances, which sometimes seem to herald what a client is about to speak of.
- Interacting with multi-sensual moving forms, which involve all the senses except touch.
- Having intense, embodied emotional experiences, which feel as if one is experiencing the emotional life of a client.

Each of these occurrences stands out because participants' actions or thoughts seems to match a client's thoughts or experiences in a way that seems inexplicable. Sometimes the suddenness or 'out of nowhere-ness' of the experience alerts the participants to the possibility of it being out of the ordinary, before the significance to another is discovered.

Many similar patterns emerge in the participants' stories. Surprise is a typical first emotional response. Delight and awe usually accompany the experiences although some also feel extraordinary, weird, strange or odd. Some experiences are uncomfortable, invasive or annoying but they are not frightening. Many of the visual experiences create doubt in the participants about whether or not they are hallucinations. Thus people seek validation for their experiences as being 'perceptions' by looking to others who have experienced the same thing or to theory to find some consensual meaning. However, although they create doubts, many of the experiences are described as specifically different from ideas, or imaginary experiences. All the experiences of apparently 'precognitive knowings' are distinctly different from 'intuitive' grasps of meaning. Rather, they are interpreted as a 'receiving' of messages or information.

The states of being, before the experiences occur, are 'open', 'altered' or 'meditative', and receptive to 'whatever' may eventuate. This state is characterized by a lack of self-consciousness and spaciousness, which is empty rather than full, in which attention is unfocused and there is a heightened sensitivity or attunement to the

atmosphere. There is also a change in the awareness of time, which feels slowed down, timeless, or as if the future and past are all available at once. In these states there is a sense of being in direct contact with the world such that the difference between inside and outside seems less clear. The experiences also lead to deeper intimate connections with clients. They also evoke a sense of the experiences being spiritual in some way.

The experiences also often have an emotional force or energy and are palpable, vivid and feel real in ways that give the occurrences a quality of having a life and intelligence of their own. Receiving knowledge in this way evokes a sense of wonder. It is often interpreted as the person being a channel to or attuning or resonating with knowledge, which comes from another realm or is sent by an intelligence, which exists in its own right and is communicating intentionally.

The phenomena described in my findings are ‘inexplicable’ because they do not fit within a Cartesian, everyday view of the world, with linear time and three-dimensional space. The Cartesian world-view tells us that we cannot perceive things at distances beyond the capabilities of our physical senses of hearing, seeing or smelling and cannot know things ahead of time. The seeming knowings may seem like extra-sensory perceptions, but this is not an accurate description because participants do use their bodies and senses. The emotional responses of excitement and the sense of connection and intimacy with clients that these experiences evoke, make them stand out as meaningful in a way that seems to be not simply a subjective, personal or psychological experience.

Although, within the phenomenological framework, we cannot know an objective truth, it is a human need to try to establish that what one perceives has some accord with a world that is shared by others. The belief in the existence of an objective external world, which exists independently of a person’s perception of it, and which can be discoverable, provides a common reference point, which enables us to function as though we are living in the same world. In an everyday way we tend to believe that the world we perceive and share is an objective reality. Believing that what one perceives is objectively ‘real’ is expressed as knowing. ‘Knowing’ is often established

by making correlations between an internal perception and an external object or event. Experiential or intuitive sensing is also described as 'knowing'. However, these phenomena create doubt about where they are 'perceptions' of the world or created from within. In this way, they bring us to the essential problem of perception.

Where does perception originate? I cannot truthfully say that my perception of a particular wild flower, with its colour and its fragrance, is determined or "caused" entirely by the flower- since other persons may experience a somewhat different fragrance...But neither can I say truthfully that my perception is "caused" solely by myself...or that it exists entirely "in my head". (Abram, 1997, p.53)

The issues of perception, reality and interpretation that these phenomena raise will be discussed in the next chapter.

## CHAPTER 5: DISCUSSION OF THE FINDINGS

The sections of this chapter follow the themes of the interpretations emerging from my findings. Because my aim is to bring these phenomena into more open discussion within my own psychotherapeutic community, I particularly address how my findings are, and are not, supported by psychoanalytic literature. I also reflect upon the literal way psychotherapeutic theory is commonly used and how this echoes the conceptual nature of theory, as well as the philosophical confusions within the theory. I also explore how the characteristics of the phenomena may lead to the interpretations they do.

The experiences and interpretations of the eight participants, my discussions with my supervisors, and all the thoughts expressed in the books I have read have fused with my own thoughts and have been woven into the synthesis of ideas that are expressed here. Many of the thoughts I have had over the process of writing have melded, influencing the colours and textures of the thesis I am presenting. “Whatever I have encountered in my past now sticks to me as memories or as [near] forgotten experiences that somehow leave their traces on my being” (van Manen, 1990, p. 104).

Discussion is under the following sections:

### Attuning to another’s unconscious.

Experiences of knowing things inexplicably are often interpreted, as attuning to, or accessing, another’s unconscious mind. These interpretations are based on ideas and concepts about the unconscious mind expressed within psychotherapeutic literature, which differ from the phenomenological understanding of unconsciousness as a lived experience. Psychotherapists' use of the concept of ‘the unconscious’ is explored, as well as how the paradoxical nature of the experiences leads to the interpretations and confusions that are in the theory.

### Losing the sense of boundaries between the self and others.

Both experiential states of interconnectedness with the world and sudden, intense, physical experiences of seemingly ‘knowing’ clients’ emotional experiences are often

interpreted as a loss of the usual boundaries between the self and the world, or as the psyche not being contained within the body boundaries in a literal way. The way psychotherapists commonly speak of feeling a client's feelings, in a literal way, is explored as well as how this echoes the ideas, as well as the confusions, that are in the theory.

### Spiritual states, realms and beings

The sense of oneness between the self and the world and others is often interpreted as 'spiritual' experience. Several characteristics of the inexplicable phenomena lead them to be interpreted as communications from an invisible, or 'spiritual', entity or intelligence, which has an intention to heal. This intelligence may be interpreted as the unconscious mind, God or ancestral spirits (tupuna), according to the worldview the person comes from. The reasons both 'spiritual' experiences and beliefs have often been pathologised within psychoanalysis as regressive or illusionary is explored as well as how spiritual interpretations may emerge naturally from the lived experience of these phenomena.

### Doubting and believing

Many of the phenomena cause people to doubt their experiences as objective 'perceptions' because they do not fit within what the Cartesian worldview says is possible. However, the need to confirm that we are not alone in our perceptions is important to our sense of sanity. People commonly find validation for their knowings by correlating their experiences with those reported by others, or looking to their spiritual or theoretical worldviews, for confirmation and explanation. Many also express absolute knowing that their intuitive senses are valid perceptions of something, even though they know this may not be able to be experienced by others. The doubts and beliefs are explored in relation to the participant's worldviews.

### Thinking and symbolisation

Inexplicable knowings are treated with scepticism within psychoanalytic theory because they are associated with omnipotent thinking and fantasies of oneness. Omnipotence is also considered to be contrary to the development of symbolisation that is associated with the separation from the world. However this understanding does

not match with my findings that these experiences are complex and symbolically meaningful phenomena although they have not emerged from a process of reflective thought. However, descriptions of pre-reflective processes like reverie seem more akin to the phenomenological understanding of symbolisation in which language emerges from being and embeddedness in the world.

### Psychosis and hallucination

Seeing and believing in the existence of 'spirit' forms as objectively real is associated with psychosis and hallucination within the psychoanalytic worldview. Even though such experiences are understood differently within the Maori worldview, the dominance of the pathologising western worldview means that they tend to be hidden and not brought into conversation with supervisors by either Maori or Pakeha. Other ways these experiences could be understood are explored.

### Caring and intentionality

All of the experiences are described as bringing the therapists and counsellors closer to their clients, in profound and positive ways. The possibility that emotional openness and caring intentionality towards clients may be important in the receptivity to the experiences is discussed.

## **Attuning to another's unconscious**

My findings show that experiences of both inexplicable knowing and states of interconnectedness involve both a feeling of 'a part of' or embedded in the world, at the same time as perceiving, or 'attuning to', a world that exists for itself. The duality between these two aspects of the experience, the subjectivity and the sense of objectivity of perception, is described by Abram (1997):

I abandon myself to it and plunge into its mystery, it 'thinks itself within me'. I am the sky itself as it is drawn together and unified, and as it begins to exist for itself; my consciousness is saturated with this limitless blue.  
(p. 54)

This phenomenological description poetically describes the paradoxical experience of both the lack of differentiation between self and world, as well as the heightened attunement to the world as existing separately and for itself.

Abram, like van Manen, suggests that this is core to how we live in the world in an everyday day sense but are not conscious of it.

However, psychotherapists interpret experiences of knowing things about their clients inexplicably as ‘being attuned to’ or ‘accessing’ clients’ unconscious minds. However, the word ‘unconscious’ is used in many different ways, which reflect differences in the theoretical language. In particular, it is used to refer to both an aspect of mind and a place i.e. to both the thing that is accessing information as well as the ‘thing’ or ‘place’ being accessed. Both Freud and Jung use this double meaning of the word ‘unconscious’. The unconscious is also often spoken of as not bound by time and space. Therefore states in which time does not feel linear and space does not feel three-dimensional tend to be associated with ‘the unconscious’. In this research, such experiences are often spoken of as if they mean that ‘the unconscious’ is literally extending in space and time, like a field, or of there being a transmission of information through space which can be ‘picked up’ by the unconscious.

We do not know if there are energetic fields that carry information involved in these experiences. However, the idea of fields provides a metaphor, which enables therapists to explain seemingly inexplicable experiences. De Quincey (1999) says:

One suggestion often made about such ‘action as a distance’ is that we are dealing with the phenomenon of field consciousness but this may well turn out to be a confusion of metaphors. We have to be extra-careful with attempts to explain consciousness by means of metaphors derived from physics – for example, the idea of ‘field consciousness’ or consciousness as energy. The core difficulty is that the notion of ‘field’ implies something extended in space, and this is in direct contrast to what we actually know about consciousness. (p. 1)

In the following discussion of my findings, in relation to both Jung’s and Freud’s conceptualisations of the unconscious, I reveal more about the worldview in which psychotherapists’ interpretations of the phenomena are based, as well as some of the reasons psychoanalysis’s conceptualisation of the unconscious means that these phenomena do not have a place in theory.

Jung's vision of the unconscious is one that tries to address these experiences and supports my findings. Jung (1963) describes how his experiences of what he calls non-temporal states seem to have an objective quality.

It is impossible to convey the beauty and intensity of emotion during those visions. The visions and experiences were utterly real; there was nothing subjective about them; they all had a quality of absolute objectivity. We shy away from the word 'eternal' but I can describe the experience only as the ecstasy of a non-temporal state in which present, past and future are one. (p. 275)

This description echoes my findings about non-temporal states. Perhaps it was the realness and the sense of objectivity about these experiences that led Jung to suggest that what we think of as our individual egos may, in fact, be like the peaks of the waves appearing out of a greater ocean of interconnectedness. He also believed that the unconscious communicates with us in dreams and in synchronistic happenings. In this way it is considered to be intelligence with a life of its own, much like many psychotherapists in this research believe. Their beliefs are supported by, and possibly based on, Jung's work. Jung suggested that: "The unconscious, as the result of its spacio-temporal relativity, possesses better sources of information than the conscious mind, which has only sense perceptions available to it" (Jung, 1963, p. 292). Here he speaks of 'the unconscious' as if it is a form of consciousness, which is not bound by time and space and which can access other sources of information than those accessible by the senses. This is quite different from the idea of a field that extends in space; nevertheless, by referring to the unconscious and other sources of information as things in themselves, his thinking is within a Cartesian framework. However, Jung is trying to describe paradoxical experiences in which there is both a sense of embeddedness in the world, at the same time as a sense of perceiving the world as separateness from the self.

Phenomenologist Merleau-Ponty may be referring to something similar with his idea of the "perceptual consciousness", which he described as "the deep-seated momentum of transcendence which is my very being, the simultaneous contact with my own being and with the world's being" (Romanyshyn, 1982, p. 146).

Jung explained synchronistic events in which an event in the external world seemed to match an event in the internal world without an obvious causal connection between the two in the way some of my findings seem to do, as the unconscious ‘knowing’ of the event and sending as messages to the conscious mind. He wondered if this could be “a revelation of the transcendent wisdom of the self” (cited in Mansfield, 1995, p. 200).

In contrast, within post-Freudian psychoanalytic circles, the unconscious is viewed very differently in ways which mean that the sort of phenomena described in my findings have largely been dismissed, in the ways I will now outline. Firstly, the association of the unconscious with primitive id impulses, and wish-fulfilling fantasies has meant that experiences of loss of self-differentiation, such as reported in this research, have tended to be pathologised as regressive states. Although no therapists spoke of their experiences in this way, I believe that they were referring to these same attitudes when they expressed fear of being pathologised, if they spoke of their experiences to supervisors. This fear of being pathologised dates back to Freud’s own fear of being shunned by his own professional community if he was more open about his interest in “thought transference” and “uncanny” phenomena (Freud, 1925). He was also wary of such experiences because he believed that the apparently ‘magical’ nature of “uncanny” experiences, “led us back to the old, animistic conception of the universe” (Freud, 1925, p. 240).

Our primitive forefathers once believed that these possibilities were realities, and were convinced that they actually happened. Nowadays we no longer believe in them, we have surmounted these modes of thought; but we do not feel quite sure of our new beliefs, and the old ones still exist within us ready to seize upon any confirmation. (p. 247)

Freud often explained apparent ‘telepathic’ communications as the analyst having forgotten or being unconscious of having noticed something that was said by a client, in a session perhaps already some weeks previously, but which later appeared as a seemingly “uncanny” (Freud, 1925) knowing in the analyst’s mind. It is possible that some of the phenomena in my findings could be explained in these ways. This would be a useful subject to research in the future. However, Eisenbud (1946) also suggests Freud’s wariness was based in two fears:

Freud was particularly afraid of two things: that the future of psychoanalysis would be somehow endangered if analysts became preoccupied with the

“occult” and that the work might bring him face to face with his old adversary – religion, perhaps in the sense that the data might be seized upon by hungry religionists as proof that the materialist conception of the universes has not given us a correct picture of reality after all. (p. 259)

These concerns are understandable because in some ways seemingly ‘telepathic’ phenomena do challenge several of the assumptions on which psychoanalysis is based, particularly the premise that the mind is a thing in itself, which is separate from the world and others’ minds, and the principles of projection and transference. Totton (2003) suggests that therefore “Telepathy is not *allowed* to be ‘real’” because all experience is “forcibly aligned with the symbolic or the imaginary: in other words, it becomes either a *transmission of meaning* or a *mirroring of selfhood*” (p. 201).

My findings also suggest that therapists do sometimes interpret their experiences as proof that the material conceptualisation of the universe has not given us a correct picture of reality after all, just as Freud surmised, and so they do bring us face to face with religion. However, ‘spiritual’ experience is an area that psychoanalysis has little language for. The view that these experiences are undermining to psychoanalysis and/or will be pathologised still has a powerful hold on the way they are excluded from common discussion. This is part of the reason for the shame participants describe in speaking openly about their experiences. Also the literalism, confusions and contradictions within the theoretical language make these experiences difficult to find validation or meaning for within the psychoanalytic worldview. Nevertheless, it seems that many therapists and counsellors within my research have secret beliefs in spiritual communications or what could be called telepathic phenomena, which they also fear discussing in public just as Freud did. In 1926, he wrote to his friend Ernest Jones saying that: “When anyone adduces my fall into sin, just answer him calmly that my conversion to telepathy is my private affair like my Jewishness, my passion for smoking and many other things” (cited in Appel, 2000, p. 42).

### Summary

‘The unconscious’ is described as if it is both a form of conscious which can attune to the unconscious minds of others, and an aspect of mind that transmits messages, which may come either from an individual’s unconscious or from a realm of transcendent

wisdom. These confusions in the way it is conceptualised may be because of the difficulty of describing experiences of embeddedness in the world as well as perceptions of the world, at the same time. However, there are major differences between how it is conceptualised within analytic psychology and psychoanalysis. Although the understandings expressed by analytical psychology are more supportive in giving language to my findings, psychoanalytic language tends to pathologise them. This means that they are not taken seriously or hidden from open discussion today much as they were in Freud's day. However, although expressing doubt about such phenomena, Freud shared my hope that "the reluctance to view the data springing from 'occult sources'" will "be overcome" (Eisenbud, 1946, p. 226).

### **Losing the sense of boundaries between self and others**

There are two ways in which the lack of boundaries between the self and the world was experienced.

The states of openness before the experiences took place had an experiential quality of a barrier between the self and the world being removed. The shift from the conceptual sense of self to the lived experience of the moment, in which the self is experienced as not separate from the environment but rather a part of it in a heightened and un-self-conscious, un-reflective, way is what van Manen (1990) calls spatiality or 'lived space'. Lived space is subjective, rather than a conceptual three-dimensional space. It is "more difficult to put into words since the experience of lived space (as lived time, body) is largely pre-verbal; we do not ordinarily reflect on it" (van Manen, 1990, p.102).

Many psychotherapists also speak of their experiences of seemingly being able to know, feel, or respond to, their client's unexpressed experiences as being in an "interpenetrative mix up", or a "merger" with them, or as a loss of the usual boundaries or barrier between the self and others.

The phenomenological experience of embedded and interconnected states feel like more than ‘just an internal experience’, rather they have a quality of being in direct contact with the truth of the world. Merleau-Ponty (1962) suggests that this is the closest we may come to “re-achieving a direct and primitive contact with the world” (van Manen, 1990, p. 38). Van Manen (1990) also refers to this direct contact with the world as “awakening the soul to its primordial reality” (p. 50). Here van Manen uses the word ‘reality’ not to refer to a concept of something outside him but to the ‘soul’s reality’, which is embedded in the world. Perhaps it is the soul’s recognition of these states as a primordial reality that makes people emphasize that they are not imagining the things they perceive in these states, even though from an objective position they know they could be interpreted as imaginary.

To explain these experiences, Jung suggests that the boundaries of the psyche may not be identical to those of the body and refers to the psyche as having a “non-spatial aspect” (Schwartz-Salant, 1998, p. 81) in the same way he refers to the unconscious as being outside space and time. Within psychoanalysis, Winnicott speaks of a mother and baby being at one. He says, “two separate people can feel at one but here at the place I am examining the baby and the object are one” (Winnicott, 1980, p. 94).

Experiences of uncomfortable physical feelings, which were believed to belong to clients, were also referred to as “projective identification” within my findings. This term is commonly used to refer to a psychotherapist’s “feeling a client’s feelings” in response to a client’s “projecting parts of themselves into the therapist”. However, analyst Thomas Ogden expresses concern about the literal way psychotherapists speak in these ways and believes projective identification to be a “group of fantasies”. Ogden (1979) points out that even though the emotional pressure exerted by the projections is felt to be very ‘real’ this is not to be thought of as a ‘real pressure’, transmitted from one to another, but a result of “a multitude of interactions between the projector and the recipient” (p. 358). I agree with Ogden that this literalism creates confusion. However, I feel that the idea of projective identification does not help us understand many of these phenomena. For instance, some of the experiences involved no interaction between the therapist and client. Also, projective identification is based on the idea that the client projects ‘primitive un-symbolised elements’ into the therapist

(Hinshelwood, 1989). However, although some of the experiences could be described as unsymbolised raw elements, many of the 'knowings' appeared to take the form of highly complex and symbolised images or information. Although the concept of projective identification does not fit these phenomena well, participants use it because there is none more suitable within psychoanalysis.

In recent years, psychoanalytic thinking about boundaries of the self and others is changing. For instance Ogden, Stolorow and Atwood are moving toward a phenomenological way of speaking of 'mind' as something that is co-created in relationship. Ogden (2001) says: "It is no longer self-evident what we mean when we speak of the analyst's or the analysand's "own" feelings or even the patient's "own" dreams and dream associations" (p. 20). This way of speaking supports my findings that both feelings and dreams may not just relate to the individual who has experienced them but can also be known or experienced by another.

Although he is not addressing the sorts of inexplicable knowings I am researching, many of Ogden's descriptions of the 'analytic third', which is "unconsciously co-created" in the "interpersonal field" between analyst and client, do seem to mirror my findings. For instance, Ogden (2000) says the analytic third may "take on a life of its own in the interpersonal field between the analyst and the patient". This may take the form of unconscious "acting out on the part of the therapist". He also speaks of the analytic third as having intentions. The "intention", he says, may be to heal or, indeed, it may have a pathological form e.g. it may have the capacity "to hold the analytic pair hostage" and prevent thinking (p. 491). In this way he speaks of this co-created unconscious third as intelligent and intentional. He also sounds as if he experiences himself as a medium for 'something', which comes through him much as the participants did. He quotes poet A.R. Ammons who, he says, can better convey what he means:

not so much looking for the shape  
as being available  
to any shape that may  
summon itself  
through me  
from the self not mine but ours.  
(Poetics, 1986, p. 61.)

While Ogden speaks of the differentiation between an analyst's and patient's experience and dreams as "no longer self-evident", he also speaks of the analytic third, like projective identification, as "being co-opted by the intensity of the shared unconscious fantasy/somatic delusion in which we were both enmeshed" (Ogden, 2000, p. 89). In defining these experiences as fantasies, as opposed to reality, he seems to return to the Cartesian dualistic worldview, away from an interpretive co-created one and, in so doing, diminishes the realness, significance and the remarkableness of the experiences.

### Summary

One of the ways psychotherapists interpret experiences of being embedded in the world is as a literal loss of boundaries between the self and others. Speaking of these states as literal realities is further emphasised by the experiences of emotionally or physically embodied 'knowings' of what clients are feeling. This literalism reflects the ways these experiences are referred to, particularly by Winnicott. Ogden, who also tries to address similar phenomena, speaks about experiences of lack of differentiation as real but then concludes that they are fantasies or somatic delusions. These same confusions seem to occur throughout the theoretical language, as well as the common language used by psychotherapists. This may be because the philosophical assumptions on which psychotherapeutic theories are based are not well thought out.

### **Spiritual states, realms and beings**

Belief in the possibility of accessing spiritual realms of knowledge or communication with spiritual entities, often-called divination, is common in many traditions and cultures: Celtic, Maori, Christian and others. My findings show that although the interpretations take different forms, according to theoretical or spiritual worldviews, there is universality to the interpretations of the experiences as being either an attuning to a spiritual realm or being sent messages from an intelligent communicating other.

Many of the psychotherapists, most of whom are Pakeha, refer to unconscious communication from their clients. The unconscious is spoken of as an intelligent

aspect of both their own and their client's mind, which is beyond the control of either person and yet which is intentional. Some Pakeha also interpret the information or knowledge as coming from an Omnipotent God or as God being everywhere.

According to their cultural worldview, Maori counsellors who have often not been schooled in the same theoretical formulations do not speak of the unconscious but envision themselves as being used as a channel or medium to tupuna who are "in spirit" and whom they assume have intentions to heal. In the Maori worldview, the word 'wairua' is used to refer to spirits of those alive as well as dead. The wairua of ancestors are also believed to visit living people, often communicating through a living relative, who is a medium. Through this person, the ancestor can act as a guardian of the living relatives (Orbell, 1995, p. 85). The sense of being a channel to, or tuning into, divine information or a spirit presence is sometimes felt to be a gift. The excitement about this suggests people feel they are special and perhaps chosen.

Within psychoanalysis belief in a greater spiritual being, or being chosen, tends to be interpreted as a displacement of an infantile need for an idealized figure or a defensive fantasy, created to keep away the awareness of isolation, insignificance or death. Seeing a 'spirit' presence is likely to be interpreted as a projection of an internal image, or a hallucination and believing such things are 'real', a sign of psychosis. (This will be discussed further in the section on psychosis on p. 83).

My findings suggest that the words "there", "realm" and "dimension" are often used in a way that makes it unclear whether they are referring to shift into an altered or spiritual state or to an other-worldly spiritual place. Perhaps it is partly this confusion between spiritual experience and the concepts that arise out of such experience that has led to psychotherapy grouping and defining both spiritual experiences and beliefs as regressive longings or states.

I will now discuss how 'spiritual' experiences may be interpreted as literal truths about the world.

Mystics and practitioners of meditation often use the word 'spiritual' to refer to experiential states of interconnectedness, in which there is a sense of oneness with everything, or a lack of barrier between self and world as well as a sense of timelessness. Crook (1990) refers to Tibetan Buddhist practice in which "There is simply the environment within which a body sits - awareness reaches from horizon to horizon as one undivided experience; self and 'reality' appear as one" (p.108).

My findings suggest that many therapists and counsellors who experience these peaceful states interpret them to be an experience of an underlying spiritual reality of the oneness between the self and the world. The intensity and embodied 'realness' of the states is also suggestive of there being a perception of the truth of our embeddedness in the world. Many spiritual writers support this view.

Schwartz-Salant (1998), a Jungian analyst, describes the shift in consciousness when an analyst is willing to sacrifice trying to 'know' whose material he is dealing with, and how the experience has a divine quality.

As a result of the conscious sacrifice of interpretation, the senses are enlivened as colours and details become more vivid, and even the taste in the mouth can change. Analyst and analysand sense a feeling of an adrenaline rush or, in spiritual terms, perhaps the presence of divinity. (p. 65)

He also suggests that this "presence of divinity" is a field "quality" which becomes "a 'presence' for both people. Then each person, paradoxically, comes to be both inside this presence and simultaneously an observer of it" (Swartz Salant, 1998, p. 65). His descriptions mirror my findings about how the intensity of the embodied experience and the paradoxical experience of being both embodied in and observing the world are associated with the presence of divinity.

From a phenomenological point of view, the experiences have characteristics that may lead people to interpret them as being from an intelligent and active other. The phenomena appear to have a life of their own and be out of the control of the therapist's will, giving a sense that something 'other' is involved. The inexplicability of the appearance of words, images or feelings and the fact that the 'information' is

already complex, meaningful, metaphorical and imaginative also creates a sense that there is an intelligence that is communicating.

Experiences of seeing 'spirit' forms, in particular, which are often described as indistinguishable from perceptions of 'real' people, are less obviously 'interpretations' of spiritual involvement as much as a lived experience of the Maori spiritual worldview. Although the psychoanalytic worldview might interpret these things as hallucinations, projections or examples of primitive animism, Abram (1987) suggests that: "Prior to all our verbal reflections, at the level of our spontaneous, sensorial engagement with the world around us, we are all animists" (p. 57). He tells of how phenomenologist Merleau-Ponty also describes the lived experience of the world as active, animate, and, in some curious manner, alive. Merleau-Ponty refers to a thing as an "entity", an "Other" which at one moment "holds itself aloof from us" and at another moment actively "expresses itself" directly to our senses, in a way such that perception seems like a mutual interaction (cited in Abram, 1997, p. 55). Abram (1997) also suggests that "such animistic turns of phrase" are not simply "some sort of poetic licence that Merleau-Ponty has introduced" but that "to describe the animate life of particular things is simply the most precise and parsimonious way to articulate things as we spontaneously experience them, prior to all conceptualizations and definitions". It is "our most immediate experience of things" (p. 56). Perhaps this natural animism, the lived sense of realness, the seeming 'accuracy' of the information, the complexity of the images and information lead participants to interpret that their experiences are other-worldly because, as Jung (1963) says, it is impossible to ascribe them to ourselves.

The word of God comes to us and we have no way of distinguishing whether and to what extent it is different from God. It is not affected by the creation of our will. Our chief feeling about it is that it is not the result of our own ratiocinations, but that it came to us from elsewhere and if we have precognitive dreams how can we possibly ascribe them to our own powers. (pp. 313-314)

As Jung says, we cannot know if it is the word of God. However, perhaps we might say it is 'natural' that we ascribe such power to another, because we did not create it.

## Summary

Many qualities of states of interconnectedness and the inexplicable experiences evoke a sense that they are communications from a spiritual entity. Such experiences may also be interpreted as being a perception of an underlying spiritual or interconnected reality. Although within psychoanalysis such ideas are associated with psychosis or viewed as infantile fantasies, phenomenologist, Merleau Ponty suggests that all perception, prior to conceptualisation, is experienced as a mutual interaction with an alive and interacting world.

## **Doubting and believing**

As humans, the need to confirm that we are not alone in our perceptions is important to our sense of sanity. When people appear to know things which they do not believe it is possible to know within the everyday Cartesian view of what is possible, or see things that they do not believe can be ‘really there’, they begin to doubt the validity of the perceptions. The sense of our ‘perceptions’ as relating to an external world differentiates what we believe we ‘perceive’ from a hallucination or what we ‘imagine’, which is considered an internal event or experience only. As I discussed earlier, one of the ways people come to believe that their perceptions are objectively ‘real’ is by finding validation from the correspondence between two things, be they two events, two people’s perceptions, or a theoretical worldview.

In the examples in which people saw things which they did not believe could actually exist in the external world, and had nothing to ‘correlate’ their perception with, their first response was to doubt that what they saw was ‘real’, in the sense of existing outside in the world or a hallucination, which is the way psychoanalysis would interpret it. However, when for instance changes in a client’s appearance, matched what a client then spoke of, the ‘correlation’ suggested that the images may not have been the therapist’s hallucination, but a pre-cognitive perception of something the client may have been thinking about.

In a healing group, when others also reported seeing a “spirit form”, the counsellor felt that her perception was validated, because it was shared. The sharing of perceptions meant to her that she was not just hallucinating. Another way of validating experiences was to turn to a theoretical framework. Maori who saw, heard or smelt moving forms, which appeared human, turned to the Maori worldview to provide support and language with which to think about these experiences. Pakeha psychotherapists turned to theory and ideas about unconscious communication as a way of making sense of their experiences. These constructs both provide a way for people to interpret their experiences as valid ‘perceptions’. However these sorts of correlations between two events, or two perceptions do not mean that the experiences are objective perceptions.

As much as having one’s perceptions validated is important, for a sense of sanity, doubting too is a sign of sanity. In psychoanalysis the sense of ‘absolute knowing’ that implies a lack of doubt, expressed by some therapists and counsellors could be considered cause for concern because it conveys that the speaker believes that what they interpret about their experiences is true in a way that is more than a subjective truth. (This will be discussed further in the section on psychosis on p. 83). However, the word ‘absolute’ knowing is often used to refer to ‘intuitive’ knowing of something when it cannot be tested via correlation but may come from an embodied sense. An intuitive knowing just comes.

My findings show that some people expressed more doubt than others about the objectivity of their knowings. Although it is natural to doubt these sorts of experiences as valid perceptions, the level of doubt partly depended on the strength of belief the person had in a worldview that supported their interpretation as meaningful. Although the Maori counsellors showed less doubt about their ‘perceptions’ because mediumship is a meaningful part of their lives, they also initially showed the same doubts as Pakeha, who tended to show more doubt because they were influenced by the psychoanalytic worldview, which associates these experiences with omnipotent thinking and psychosis. Although Maori looked to their traditional worldview to make meaning of their experiences, they too live and work in a western worldview and have been influenced by the meanings the western world makes of these things. Both

Pakeha and Maori expressed fear that if they speak to supervisors about their experiences as real perceptions, rather than just internal fantasies, they might create concern about their sanity, which would endanger their reputation. This means that these experiences are being hidden.

### *Thinking and symbolisation*

One of the reasons the claims to many of these experiences as 'knowings' are treated with scepticism in psychoanalytic terms is that they seem to be omniscient on the part of the therapist and potentially omnipotent on the part of the client. Freud (1925) suggested that claims to know things, in the ways participants describe, is an example of "the subject's narcissistic overvaluation of his own mental processes" and that such "unrestricted narcissism" is from "that stage of development which strove to fend off the manifest prohibitions of reality...by the belief in the omnipotence of thoughts" (p. 240). Omniscience and omnipotence are considered to be primitive processes based on wish-fulfilling fantasies, which are contrary to the development of secondary process and symbolic thinking. Symbolic thinking is believed to develop with the working through of mourning which leads to the awareness of reality and 'separateness' from the others. Symington (1996) says:

It is through omnipotence that one hallucinates, distorts one's perceptions, obliterates memory, sabotages thought, banishes guilt and substitutes fantasy for reality. Through omnipotence, the processes of the mind and the mind's objects are destroyed. (p.175)

Within psychoanalysis, symbolic thinking is associated with the ability to discriminate between inside and outside, self and other. The individual's awareness of him or herself as a separate individual, different from everyone else, comes with the development of an internal world. It is this coming to be aware of others as separate beings, with minds of their own, that is important in a child's beginning to develop a mind of his/her own. In psychoanalytic terms, symbolisation and language come with the ability to tolerate the frustration, which comes with the awareness of the space between self and other. Noel-Smith (2003) suggests that knowledge of the 'real' world is found only through the giving-up of omniscient knowledge and coming into the boundaries of time and space.

The arrogant assumption that one can actually know the outer world through *being* it, through incorporating it, must be relinquished and the loss of the possibility of an omniscient understanding of the real world, unbounded by our organising principles of time and space, must be relinquished. (p. 20)

The attitude here is clear, the suggestion of direct experience of, or oneness with the world, is omniscient and arrogant. Reality is found by coming into the organising principles of time and space. This emphasis on knowledge of reality emerging from the separation between self and world means experiences of direct contact or embeddedness in the world are likely to be associated with internal fantasy as opposed to external reality.

In terms of psychological development, these criticisms are valid. In an everyday way, the ability to differentiate self and other, and inside and outside, is important for mental health and the inability to make those differentiations necessarily evokes concern. Indeed, it may be that therapists, or clients, make too much of the similarities between the thoughts or actions and the connected events when, in fact, they may be a wishful making of similarities, due to the desire to believe these things are true.

However, although the therapists could be said to be interpreting the similarity of two events as a form of omniscient knowing, this is not the same as the sort of omnipotence that Symington means. The omnipotent fantasy of being able to control the other, which is a defence against feelings of powerlessness, is not relational. In contrast, my findings suggest that the therapists are engaged in the moment with clients in a relational and embodied way when these experiences happen. Chirban (2000) distinguishes what she calls “oneness imagery”, which is conceptual and outside the moment, from “oneness experience”, which is embodied and inside the moment. She suggests oneness imagery is symbolic and related to fantasy as opposed to experiential oneness states, which are “catalysed by the subject’s energetic readiness, not by a search for oneness” (p.10). By aligning symbolic thought with fantasy rather than reality she takes a new orientation to the Cartesian divide between fantasy and reality which plagues the analytical languaging of these experiences. More research would be needed to ascertain whether the therapists also have longings for oneness states which lead them to either be more open to these experiences or to

interpret them in ways which might not stand up to closer scrutiny. It may be that people who are more open to, or want to believe such things are 'true' are the ones who are most likely to experience them. However, this does not necessarily make them into fantasies. Eisenbud (1946) suggests that:

One is led to suspect that the source of the resistance against dealing easily with such material must be the need to hold tightly in repression one's narcissistic inclinations towards magic and the belief in omnipotence of thought. (p. 229)

This analytical attitude of defining undifferentiated and timeless states as primitive and illusory is very different to Merleau-Ponty's (1962) suggestion that they are the "closest we may come to re-achieving a direct and primitive contact with the world" (van Manen, 1990, p. 38). For van Manen and Merleau-Ponty, 'primitive' contact is not something illusory but a return to the most essential human relationship with the world. Van Manen is certainly not advocating remaining unconscious or pre-reflective in this primitive contact. He says, "consciousness is the only access human beings have to the world" (van Manen, 1990, p. 9). However, he suggests that language and symbolisation come not from separation from the world and coming into space and time but rather "Language is so fundamentally part of our humanness that Heidegger (1971) proposed language, thinking and being are one" (van Manen, 1990, p. 38).

My findings also suggest that the images or knowings that appear to the therapists and counsellors are already symbolised and meaningful, even though they have not emerged from a process of conscious thinking. However, there is a way in which what is called unconscious or pre-reflective thinking is recognised and valued within psychoanalysis. Many participants refer to being in a 'reverie' or 'alpha' state. Reverie is thought to "convert sense data into alpha-elements and thus provide the psyche with the material for dream thoughts", which is also an important part of the symbolization process (Hinshelwood, 1989, p.217). Dreaming is also thought to take place when the brain is in an alpha state, and some analysts suggest that there may be a strong similarity between what we experience as a night dream and that what we call reverie. Ogden (2001) refers to reverie as "a state of mind in which [a therapist] might gain access to the continuous conversation with himself that takes the form of dreaming in sleep and of reverie in waking life" (p. 5). The idea that consciousness emerges from alpha process or reverie comes closer to the phenomenological idea that

thinking and symbolisation emerges from being. Davey (2005) suggests that: “Bion came to the realisation that true thinking (dream-work or function) ... is an unconscious if not pre-conscious act and that what we normally call thinking is really after thinking” (p. 2).

Heidegger also describes a sort of thinking, which he refers to as ‘called’ thinking, which offers a way of describing experiences of being in the world which do not divide the thinker from the world. “Called thinking”, he says, is derived from the word “thanc”, which is also the source of the word “thank”. He says: “The thanc means man’s inmost mind, the heart, the heart’s core, that innermost essence of man which reaches outwardly most fully and to the outermost limits, and so decisively that, rightly considered, the idea of an inner and outer world does not arise” (Heidegger, 1968, p.144). He also refers to this thinking as sacred “because its devotion is held in listening” (Heidegger, 1968, p.141). This echoes the attentive, caring attitude described in my findings. This is not an inferior, non-symbolic, primitive, state of non-thinking but an emotionally connected relationship with the world. Here the knowing is not through conceptual processing and reality testing but a knowing of the heart.

### Summary

Inexplicable knowings are often pathologised in psychoanalysis as being omnipotent or magical fantasies which are a defence against the reality or separateness from others and antithetical to self-development. In this view symbolism is thought to emerge from the gap between self and others and from coming into the limiting principles of space and time. While they may appear to be omniscient, these phenomena are different from fantasies of omnipotence because they emerge out of relationship. Some analysts also speak of ‘reverie’ or ‘dream-alpha’ as processes in which symbolism emerges out of pre-conscious or pre-reflective states in a way that is more similar to the phenomenological suggestion that symbolism arises out of being, which is what my findings also suggest. However, although unconscious processes like ‘reverie’ and an analyst’s ‘being in the moment’ are valued as significant in the facilitating therapeutic environment, less attention has been paid to the lived experience of the therapist and, in particular, the accompanying changes in time and space perception that seem to take place.

## *Psychosis and hallucination*

The experiences of seeing semi-transparent still or moving forms creates even more worry within the psychoanalytic community because hearing voices and believing in visitations from spirits is associated with psychosis and delusion. Indeed, it is a serious question whether such experiences are hallucinatory or psychotic and, if they are not, how they differ, as they may be hard to distinguish at times. The following is a quote from John Nash, laureate and distinguished mathematician, who became psychotic, and whose life has been reconstructed in the film “A Beautiful Mind”. He said: “My ideas about supernatural beings came to me in exactly the same way as my mathematical ideas. So I took them seriously” (De Masi, 2003, p.1150). De Masi (2003) describes the psychotic state in this way:

The psychotic state confers a concretely hallucinatory character to the dream, allows no room for intuition (insight) and interferes with the dream-thought function. In ‘dream-delusion’ (as in hallucination) the visual perceptions annihilate the intuitive imagination and take the place of representation. (p.1161). The patient totally lacks any capacity for self-observation and awareness of his/her own mental and emotional processes. (p. 1153)

This difficulty in distinguishing is evident in my findings. While some phenomena did appear to be hallucinatory, the awareness of doubt about validity of ‘perceptions’ suggests there was not a loss of capacity for self-observation and awareness of mental and emotional process associated with these experiences. However, many people also believed their experience were perceptions of something ‘real’, although they also knew others might not think this rational. My findings also suggest that the knowledge gained from the ‘messages’ or ‘visions’ was often recognised by clients and lead to healing experiences. Maori, in particular, expressed that they knew Pakeha might think they were imagining their experiences of communication with tupuna. Although psychoanalysis generally considers the belief that these phenomena are objectively real of concern, psychoanalysis also tends to believe its own worldview is an objective truth and so finds it difficult to allow the validity of other worldviews.

Even if, from a diagnostic point of view, it is possible that some of the experiences are ‘psychotic’, the fact that therapists and counsellors of repute in the community experience such things means we need to think about them carefully before suggesting

such a diagnosis. In shamanic cultures, someone who would be thought of as mad in western culture may play an important function as a healer or bridge between the 'spirit world' and the ordinary world (Harner, 1998). Within the Maori community too it is traditionally well-respected leaders (tohunga) who have powers of prophesy through dreams and matakite. Perhaps shamanic experiences of seeing 'spirit forms' and moving in and out of ordinary and non-ordinary realities are not dissimilar to the way therapists and counsellors describe moving in and out of reflective and pre-reflective experiential states.

Because psychoanalysts tend to be frightened of such experiences it is hard to allow them to have any worth. Whatever the "truth" of these experiences as perceptions, in order to be able to make better therapeutic use of them we need to understand them and create an environment such that there is more openness to other interpretations of such phenomena. This is also important because, as Cherrington (1994) suggests: "Maori experience significantly higher frequencies of hallucination and delusions than Pakeha and Maori knowledge is an influencing variable in the content and frequency of sub-cultural delusions and hallucinations". Given this, it is especially important for Pakeha practitioners and supervisors to understand the Maori worldview of such experiences.

## **Caring and intentionality**

Although there were some instances of discomfort and words like "strange" and "weird" were used, the experiences were not described as frightening. In fact, usually they were exciting and wonderful. In most cases, whether the therapists and counsellors told their clients of their experiences or not, they were felt to lead to a deepening in the emotional connection with the client, and a sense of knowing which was more than a knowing about. Although the experiences were often described as a receiving of 'information' they sometimes seemed to be a response to a client's need. All the participants have taken on the responsibility of care for their clients. Being in touch with and affected by clients' trauma and needs means they become emotionally close to their clients. Their experiences of knowing could be understood in

relationship to clients' unexpressed needs, which they are attuned to, not only because they are open mentally and emotionally, but because they care. It is as if what we might call the intentionality of care had opened them to these experiences of profound interconnectedness and knowing. Sheldrake's research on nursing mothers discovered that: "Mothers who are miles away from their babies can have a documented 'let down' reflex at the precise moment of an unexpected and non-hunger-based cry of their infants" (cited in Martinez, 2001, p. 217). This is a very clear example of an embodied and loving connection between mother and baby for which there is no physical explanation. The therapist's task has often been likened to a mother's understanding the cries of her infant. Although the experiences described in this study go beyond what is normally considered to be within the grasp of a mother's ability to attune to her babies' needs, it may be that such phenomena awareness is based on the same embodied caring connection between therapist and clients as between mothers and infants.

## **Summary of discussion**

The mixture of subjectivity of embedded experience and interpretation and the sense of objectivity of perception involved in these phenomena seems paradoxical. This paradox is mirrored in the way the concept of the unconscious being spoken about as both a form of perception and an aspect of the mind that is outside the boundaries of time and space. Jung suggests that inexplicable phenomena, which he called synchronistic, may be explained as the unconscious having access to realms of divine knowledge or wisdom, which transcend space and time. However, within the psychoanalytic worldview, experiences of non-differentiation and timelessness, which are associated with unconscious processes, have historically been considered to be primitive, wish-fulfilling fantasies. This dualistic division between fantasy and reality embedded in psychoanalytic language, as well as the historical association of these phenomena with the 'occult', means that there has been a tendency to pathologise these phenomena. This makes them difficult to bring into open conversations within the community.

Experiences of embeddedness in the world may also be interpreted as a literal loss of boundaries between the self and others. This literalism reflects the way these experiences are referred to by some theorists. Although Ogden points out this literalism, there are also contradictions within his thinking as he moves from an interpretive stance to a Cartesian one. The many contradictions in the theoretical language about such phenomena may be because the philosophical assumptions on which the theories are based are not well thought out. Overall psychoanalytic language does not adequately address the remarkableness of these phenomena.

The intensity and embodied 'realness' of the feeling of oneness between the self and the world was often interpreted as a perception of the truth of an underlying spiritual reality. The knowings and visual phenomena appearing to have a life of their own, and the fact that the 'information' could not be known in the usual way, created a sense of an intelligent spiritual entity that was communicating. Experiences of seeing 'spirit' forms were particularly evocative of such interpretations. My findings reveal that many therapists and counsellors believe themselves to live in a world that is alive and relational, much as Merleau Ponty describes as being natural prior to all conceptualisations. However, this does not mean that these interpretations are objectively true.

These experiences create a lot of doubt about the validity of the experiences as perceptions as opposed to hallucinations or fantasies. Inexplicable knowings are associated with omnipotent thinking. Therefore, the sorts of experiences discussed in this research tend to be invalidated as fantasies of oneness, as opposed to being perceptions of reality, and are thought to be contrary to the development of secondary process and symbolic thinking, which comes with the awareness of the reality of our separateness. These phenomena appear symbolically complex and meaningful even though they do not emerge from conscious thought. Although unconscious or pre-reflective processes like reverie or alpha-function are valued, the philosophical contradictions that remain in the psychoanalytical language mean that these phenomena are still surrounded by prejudice and misunderstanding.

The seeing of inexplicable visual forms is often interpreted within psychoanalysis as signs of psychosis. The reservations expressed by the psychoanalytic worldview are important and, indeed, these experiences may fit the description of psychotic fantasies in some ways but these definitions are limiting to understanding and do not address the difference and uniqueness of these experiences. In Maori and shamanistic worldviews these experiences are understood differently but these worldviews are not recognised by psychoanalysis as valid. This means that these experiences are not being spoken about for fear that they might create concern about the sanity of those who experience them, which would endanger their reputation. No matter how we interpret these phenomena, therapists and counsellors of repute within the community commonly experience these things and believe them to be spiritually meaningful. In order to understand them, we need to create an environment such that there is more openness to experiences which are felt to be profound and healing, emotional and spiritually, and bring psychotherapists and counsellors into a deeper emotional connection with, and understanding of their clients. This is especially important for Maori.

I suggest that part of the problem is in finding suitable language with which to describe these experience is that the philosophical base, on which the psychoanalytical worldview is predicated, is contradictory and not clearly thought through. This means that it takes an interpretive and positive position at different times and is often unaware of the literalism and assumptions in its language and of itself as just another worldview.

D'Aquili & Newberg (1999), scientific researchers of 'mystical' experiential states, say that the three most common criteria for judging what is real are: the subjective vivid sense of reality, duration through time, and agreement inter-subjectively as to what is real. My findings show that therapists and counsellors also looked to all three of these ways to support their perceptions. However, time is experientially variable, so duration in time is not a validation for the external existence of a thing. A similar perception by another also does not make a perception 'true' in an objective sense because even "the 'subjects' who agree or disagree about entities being real are themselves only images or representations within the sensori-cognitive field of the

analyzing philosopher” (D’Aquili & Newberg, 1999, p. 191). Eventually they concludes that what is real can be reduced to the subjective vivid sense of reality. In the phenomenological sense, supposedly ‘real’ people are no more real than ‘spirit’ people are. Interestingly, their research also suggests that altered state experiences are still considered to be “more real than baseline reality, even when they are recalled from within baseline reality” (p. 192). This fits my findings that it is the embodied intensity of the subjective experiences, which take place in altered states that gives both the states and the experiences a sense of being more real than the everyday reality or what

D’Aquili & Newberg refer to as “baseline reality” even when they are considered later.

In conclusion, we cannot know an objective reality beyond our own interpretation. However, in order to make meaning of these experiences and possibly to have the experiences in the first place, we need to find common language for them. Leonard (1989) also says: “because the world is constituted by our common language and culture”, it “is requisite in order for anything to be visible to us at all” (p. 44). Perhaps the main difficulty in finding language for these phenomena is that we must contemplate the nature of consciousness itself. This is a daunting if not impossible task because: “The structure of nature may eventually be such that our processes of thought do not correspond to it sufficiently to permit us to think about it at all” (Ogden, 2002, p.39).

## CHAPTER 6: CONCLUSION

### **Strengths and limitations of the study**

The strength of this study is that it is opening up a field of experiences within psychotherapy that has been largely excluded from mainstream psychoanalytic theory. Although some analysts are now discussing the topic, their writing, like mine, tends to point to the lack of literature with which to accurately describe these phenomena rather than suggest new models of understanding. However, this does mean that my study constitutes a new movement within psychoanalytic thinking.

In paying attention to experiences that have been considered contentious, partly because they are associated with spirituality and/or madness, I am also attempting to reduce the prejudice relating to such phenomena. However, the contentious of the subject also means that there has been no comparative research so there is very little literature against which I can directly benchmark my work.

Another point of weakness is that my topic involves reflecting on the nature of reality and perception, which is huge, complex and impossible to do justice to in a small study. In fact, the subject may be one that our processes of thought do not enable us to consider adequately.

The possible meanings, reflections and interpretations that I have been able to make are limited by the theoretical, cultural, spiritual and scientific language frames which I have brought to the study. The possible meanings of my findings are endless and readers will inevitably contribute their own interpretations.

Although I interviewed counsellors and psychotherapists, the discussion derived predominantly from psychoanalytic literature, which is the basis of my own psychodynamic modality, as well as that from analytical psychology. This choice was based in my desire to find a place for these phenomena within the psychoanalytical community. Although I have included Jung's work I have also excluded thinkers from many other modalities.

Within hermeneutic methodology, there is no ‘truth’ outside interpretation. Although this has enabled me to illuminate the lived experience of the phenomena in depth, it has also raised many questions about the philosophical premises on which psychoanalysis has based its theories; in particular it has highlighted the way concepts are used as if they are literal realities both by theorists and practitioners. By exploring this, I have shown how psychotherapeutic theory finds it difficult to find language for these phenomena, although I have not clearly proposed a way in which this could change. I did not, however, set out to solve these theoretical debates or elaborate new theory.

From a psychoanalytic point of view, in my desire to create openness to these phenomena, rather than being restricted to the limited ways they have been previously understood, I may not have given enough consideration to the possibility that some of the experiences may have been instances of temporary psychosis. The question of whether or not these phenomena, particularly the visual experiences, are hallucinations and possible signs of psychosis is very contentious. I do not feel in a position to categorically argue the case either way. I also do not wish to suggest that the categorising of all experiences into either reality or fantasy and that diagnosing psychotic experiences is not important in the assessment of a person’s mental health. Certainly hallucination-like experiences are not within ‘normal’ experience and concern should be raised about these things. Also, in some examples, the similarity between therapists’ and counsellors’ thoughts and the events they experienced ‘knowing’ about may have been exaggerated or even fabricated unconsciously, possibly because of the therapist’s or counsellor’s desire to believe they were meaningful.

The study’s findings were also limited in terms of ethnic representation. Sometimes I also compared the experiences and interpretations of Pakeha psychotherapists with Maori counsellors and psychoanalytical theory with the Maori worldview as if they were different when there were many areas of overlap between the two.

This was a small study, undertaken in one New Zealand city. Its purpose was to increase the visibility of little known phenomena in the hope that further discussion and research will take place.

## **Recommendations for practice, supervision and training**

### Need for more open discussion and theory

My most important recommendation is that there is more discussion of these phenomena within psychoanalytic circles. My findings suggest that these experiences are difficult to describe and discuss within the mainstream psychoanalytic language because there is so little theoretical language that is currently acceptable. Analytical psychology is more helpful in providing language for the phenomena but the split between the two schools that began with the conflict between Freud and Jung means that there is little debate between the two. However, more conversation between the two schools would be helpful in opening up the door to thinking about these phenomena.

### Supervision and therapy

Both supervision and personal therapy are contexts in which therapists and counsellors need to have a safe and accepting environment in order to bring all feelings, thoughts and experiences into the open. However, at present, because of the suspicions and stigma attached to these sorts of experiences, supervisors who are responsible for both their supervisee's and the supervisee's clients safety are likely to worry about the possible implications if therapists report these experiences. Therefore they too need to be supported by open discussion that incorporates different possible understandings of these phenomena.

### Development of Theory

The lack of theoretical language is central to the difficulty in bringing these experiences into open discussion in psychoanalysis as anything other than as psychotic or fantasy experiences. Using hermeneutic methodology has led to the recognition of the heavily conceptual nature of psychoanalytic theory. There are also theoretical

contradictions between secular mechanical descriptions of the dynamics of the psyche, mystical thinking and interpretive or hermeneutic views of mind as created with context and in an embedded relationship. Although this may be due to the fact that it is a changing field, there is also considerable prejudice towards these experiences because they seem alien to the principles and Cartesian assumptions about reality, time, space, mind, and consciousness and unconsciousness on which psychoanalysis is based. Integration of some of Jung's ideas about the unconscious could be helpful in opening up these areas, as well as more reflection on the fundamental assumptions on which theories are based. Eisenbud (1947) says: "The reticence and reserve of psychoanalysis in connection with a subject that has occasioned such wide-spread interest and bitter controversy in other psychological circles is itself a phenomena worthy of consideration" (p. 229).

### Training

This lack of theory and language for these experiences also means that they cannot yet be brought into training contexts. Psychoanalytic training could also become more informed by phenomenology, which offers new ways of approaching experiences of embeddedness and provides language and a context for thinking about them, which is not pathologising. Dwelling on lived experience enables new aspects of the experiences to be revealed. The incorporation of the hermeneutic phenomenological point of view could make an important contribution to psychotherapy training. More integration of Jung's ideas in psychoanalytical training would also add balance to the dominance of its worldview.

The findings of this study also reveal the importance of meditative states. Although psychoanalysis speaks of 'being' and 'reverie' and 'alpha states', little attention is paid to the other aspects of the experiences such as timelessness and loss of senses of boundary between self and the world. I believe that all practitioners should be encouraged to pay more attention to meditative techniques and their awareness while in these states.

### Openness to spiritual experience

The word spiritual has many meanings and the subject is often considered personal and sacred in a way that cannot be questioned or deconstructed. Rigorous discussion about spirituality often challenges peoples belief systems and evokes very strong feelings. Simmond's (2004) research on how spirituality is viewed in psychoanalysis found that spirituality has been a blind spot of psychoanalysis. He also found that therapists want spiritual matters to be considered as valid concerns, as well as challenged as appropriate, just as other matters brought to psychotherapy and supervision are.

### Hazards of use

Because of the commonly held beliefs about these phenomena, and their confusion with psychotic phenomena, there are also some potential hazards for therapists and counsellors in telling clients of their experiences. Telling a client of such an experience could be frightening. It might evoke doubt about the therapist's sanity or an increased idealizing transference onto the therapist as an omnipotent figure. This would conflict with the usual therapeutic belief that a client's self-empowerment comes with the disillusionment of their childlike transference onto the therapist and their coming to 'realize' that the therapist is not all powerful. An increased idealization of a therapist as all-knowing could also lead to the avoidance of grief, which is an important part of the process of self-development. These experiences may be confusing for therapists and counsellors too in that they may also fulfil a therapist's longing to be omnipotent and counter the need for them to be in touch with their vulnerability and 'not knowing', which are important parts of the therapeutic process. Taking these things literally may also lead further away from a transferenceal understanding of their meaning in the therapeutic relationship, which is essential for the working through of old patterns.

### Cultural issues

At present the numbers of Maori entering the field of psychotherapy is low and my findings suggest that Maori counsellors are inhibited from bringing their inexplicable experiences to Pakeha supervisors for fear that they will be misunderstood. Therefore,

having a culturally open attitude to the understanding of these phenomena is important because such experiences are central to the Maori worldview.

## **Need for further research**

There is a clear need for more research in this field. There has been considerable quantitative research on precognitive knowing and distance viewing with varying levels of rigour and success, but within psychotherapy there have been few studies. The research I have presented has raised many questions. Areas that I would like to see investigated, include:

- How might Maori interpretations of these phenomena be further understood? This would be in accord with the Treaty of Waitangi, Article 4, on the need for religious freedom, including Maori traditional beliefs and spiritual values.
- How are symbolism and language created? Although symbolism is usually spoken of as emerging from thought, my study suggests that symbolism exists in the pre-reflective and embodied experience.
- How might the social and cultural interpretations of inexplicable phenomena be further understood?
- How do these phenomena differ from psychotic experiences?
- Do therapists and counsellors have a longing for oneness experience? And, if so, how does this fit with their personal psychology, and does this lead them to be more open to these experiences?
- How could these experiences be used within the therapeutic context (for instance: what the effects would be of telling clients, or not)?

- How might meditative techniques, and the awareness of the changes in time and space perception, which take place in reverie and altered states, be taught and used in training programmes?

## **Ending**

This study has sought to open discussion about the nature of inexplicable phenomena in psychotherapy and counselling relationships. The findings describe a range of experiences that are inexplicable within the Cartesian worldview, the experiential states in which the phenomena commonly occur, and the varying interpretations made of the phenomena. These are discussed in relation to psychotherapeutic theory and their problematic place in psychoanalytic theory is particularly emphasised. Although the experiences are not frightening per se, thinking about their meaning arouses confusion and fear perhaps because they raise questions about the nature of reality, perception and mental illness. However, these experiences also have profound emotional effects on the therapists and counsellors and their clients. Because there is little validating language with which to discuss them, therapists and counsellors often resort to spiritual or scientific language and thus have difficulty recognising and adequately responding to or using phenomena that have potential for healing. This means that their therapeutic benefits are untapped.

It is my hope, much as it was Freud's, that psychoanalysis can overcome its prejudice against exploring these phenomena. I am heartened by Freud's words that: "If I had my life to live over again, I should devote myself to psychical research rather than to psychoanalysis" (Jones 1957, p. 32).

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## APPENDIX A: MEMORANDUM

### Academic Registry - Academic Services

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To: Stephen Appel  
From: Madeline Banda  
Date: 19 June 2002  
Subject: 02/49 A qualitative study of psychotherapist's experience and understanding of unusual phenomena while working with clients.

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Dear Stephen

Your application for ethics approval was considered by AUTEK at their meeting on 10 June 2002.

Your application was approved for a period of two years until 10 June 2004.

You are required to submit the following to AUTEK:

- A brief annual progress report indicating compliance with the ethical approval given.
- A brief statement on the status of the project at the end of the period of approval or on completion of the project, whichever comes sooner.
- A request for renewal of approval if the project has not been completed by the end of the period of approval.

Please note that the Committee grants ethical approval only. If management approval from an institution/organisation is required, it is your responsibility to obtain this.

The Committee wishes you well with your research.

Please include the application number and study title in all correspondence and telephone queries.

Yours sincerely



Madeline Banda Executive Secretary AUTEK

From the desk of... Madeline Banda Academic Services Academic Registry	Private Bag 92006, Auckland 1020 New Zealand E-mail: madeline.banda@aut.ac.nz	Tel: 64 9 9179999 ext 8044 Fax: 6499179812
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## Appendix B:

# Participant Information Sheet

**Project Title:** A qualitative study of psychotherapists' and counsellors' experiences of unusual phenomena while working with clients.

**Researcher:** Linde Rosenberg. Dip Psychotherapy, Master of Health Science Student.

Phone (09) 623-4377 Email: linderose@ihug.co.nz

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**Invitation:** You are invited to participate in a phenomenological study that will explore psychotherapists' and counsellors' lived experiences and understandings of unusual sense phenomena and uncanny knowings when with, or in relationship to, clients. Unusual phenomena may include synchronistic body sensations, visual or aural images, dreams, premonitions, etc.

**What is the purpose of the study?** Unconscious communication, between client and therapist, is the touch-stone of psycho-dynamic psychotherapy and counselling. We may refer to these experiences as 'counter-transference' or 'projective identification' but I feel that this language does not tell us much about the nature of the phenomena. The aim of this study is to look afresh at the details of psychotherapist's and counsellor's experiences and understandings of such phenomena.

### **Who can participate?**

The invitation is open to all full and provisional members of NZAP or NZAC who are in therapy or supervision.

### **What happens in the study?**

Participation in this study will involve one or two, 1 hour, individual interviews, using open questions. All interviews will be conducted and tape-recorded by myself. During the interview you will be asked questions about your experiences of the unusual sense phenomena you have experienced in relationship to clients, as well as about your spiritual and cultural beliefs and background.

### **Protection of privacy / Confidentiality:**

The information I gather from you will not be accessible to anyone other than myself and a transcriber. Your participation will be confidential and your name will be coded to protect your identity.

### **What are the discomforts and risks?**

There is some possibility of emotional distress being caused by the discussion.

### **What are the benefits?**

This research could potentially effect the way we understand and define the limitations of human perception. This has potentially profound implications for the general understanding of human psychology, as well as the development of psychotherapy theory and practice.

This has particular importance for understanding and treatment of mental illness because it may increase our understanding of:

- a) psychological symbiosis and separation between parent and child, which are central themes of psychological development, and
- b) paranoia and the confusion between inside and outside, self and other that is central to those suffering from mental illness.

**Safety considerations:**

At the end of the interviews, arrangements will be made for a debriefing if you consider this necessary. However, we ask that you that you do not participate unless you are in therapy or supervision and have a place to process any issues that may be stirred.

**Change of mind:**

Your participation in this research is entirely voluntary. Should you decide to participate, you are entitled to withdraw from the study at anytime without penalty or reason.

Also, you are not obliged to answer any question you feel uncomfortable about answering.

**Research findings:**

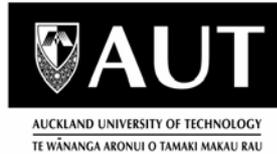
A summary of my research findings will be available to all participants, when they are complete and I will be happy to discuss them with you.

**Participant Concerns:**

Any concerns regarding the nature of this project should be notified in the first instance to my Project Supervisor: Stephen Appel. 917-999 ext. 7199  
Concerns regarding the conduct of the research should be notified to the Executive Secretary, AUTEK, Madeline Banda,  
[madeline.banda@aut.ac.nz](mailto:madeline.banda@aut.ac.nz) 917 9999 ext. 8044.

**Approved by the Auckland University of Technology Ethics  
Committee on 10<sup>th</sup> June 2002.  
AUTEK Reference number 02/49**

## Appendix C:



# Consent to Participation in Research

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**Title of Project:** A qualitative study of psychotherapists' and counsellors' experiences of unusual phenomena while working with clients.

**Project Supervisors:** **Stephen Appel**

**Researcher:** **Linde Rosenberg**

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- I have read and understood the information provided about this research project.
- I have had an opportunity to ask questions and to have them answered.
- I understand that the interview will be audio-taped and transcribed.
- I understand that I may withdraw myself, or any information that I have provided for this project, at any time prior to completion of data collection, without being disadvantaged in any way. If I withdraw, I understand that all relevant tapes and transcripts, or parts thereof, will be destroyed.
- I agree to take part in this research.

Participant signature: .....

Participant name:

Date:

Project Supervisor Contact Details: Stephen Appel AUT ext.: 7199

**Approved by the Auckland University of Technology Ethics Committee on  
10<sup>th</sup> June 2002  
AUTEK Reference number 02/49**

## **Appendix D:**

### **Definitions of psychoanalytic terms**

#### Alpha-function

The process involved in taking raw sense data and generating out of it mental contents which have meaning, and can be used for thinking (Hinshelwood, 1989, p. 217).

#### Countertransference

Countertransference has been defined in a number of different ways. In this study, it is used to refer to therapists' empathic responses to patients' transferences (Ogden, 1979).

#### Depressive position

The depressive position is associated with the capacity for mourning, reparation, empathy and tolerance of ambivalence. This comes with a person's increasing awareness of the difference between their internal and the external world and a 'realistic' idea about relationships with others.

#### Dream-work alpha

Dream-work alpha refers to the unconscious processes that occur in night-dreams and reverie in which images, thoughts and feelings get put together in meaningful ways (Eigen, 2001).

#### Ego

The ego as described by Freud was that part of the mind which mediated the id's impulses with the reality principle. He used the analogy of elevating the usable land (id) of Holland, from underneath the water (the unconscious), to suggest that:

“Where id was, there ego shall be” (Freud, (1933[1932]), p. 80).

#### Id

Freud (1923) described the 'id' as an aspect of the mind which encompasses all the primitive instinctual endowments.

### Merger

A term used by Winnicott to describe the state in which an individual experiences him/herself as undifferentiated from others. This can be a defence against need and envy.

### Omnipotence

Infancy is characterized by omnipotent thoughts, feelings and phantasies. Omnipotence is a primitive defence mechanism, which is involved in breaking down the ego-boundaries so that the experiences of separateness and envy are avoided. The omnipotent defences can also create confusion between self and object (Hinshelwood, 1989, p. 375).

### Oneness states

These are states in which experience appears to occur in the space between self and other and are characterized by a sense of unity between self and other (Chirban, 2000, p 6).

### Paranoid Position

Melanie Klein coined the term 'the paranoid position' to refer to the state in which a person is out of contact with aspects of his/her own experience and so 'projects' [see projection] those attributes or states onto others.

### Primary process

Mental and emotional processes which belong to the early development e.g. omnipotent thinking, projection or denial.

### Projection

When one person's state of mind or emotional state is attributed to another, thus creating a state of paranoia.

### Projective identification

The term "projective identification" is used to refer to a therapist's

identification with what a client projects onto him/her. It was originally spoken about by Bion as a process in which a client projects “primitive un-symbolised elements” into a therapist, who, by being able to think about them in a way the client is not able to, can give them back to the client in a symbolized and synthesized form (Ogden, 1979).

### Reverie

This term was adopted by Bion to refer to a state of mind that the infant requires of the mother. A mother’s mind needs to be in a state of calm receptiveness to take in her infant’s feelings and give them meaning. The idea is that the infant will, through projective identification [see projective identification], insert into the mother’s mind a state of anxiety and terror which he is unable to make sense of and which is felt to be intolerable (especially the fear of death). Mother’s reverie is a process of making some sense of it for the infant, a function known as ‘alpha-function’. Through introjection of a receptive, understanding mother the infant can begin to develop his own capacity for reflection on his own states of mind (Hinshelwood, 1989, p. 420).

### Secondary Process

These are mental processes, which belong to later phases of development (e.g. symbolization).

### Separation

‘Separation’ refers to the awareness that others are different from oneself.

### Transference

Transference occurs when the unconscious wishes and fears of a client are transferred onto the therapeutic relationship or the person of the therapist, as well as onto other people in their lives (Hinshelwood, 1989, p. 462).