

Mindfulness - Based Stress Reduction
Path To Individuation Through The Hero's Journey:
A Phenomenological Study

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Chapter One - Introduction

In this present day world, how humans handle stress both individually and collectively, has become synonymous with our survival. Stress is the acknowledged by the medical profession as the underlying cause of illness and disease. We are aware that it is very important for us to implement preventative measures as part of our lifestyle in order to live more healthy and fulfilled lives. It is to this purpose, that this study explores mindfulness meditation, an ancient body/mind practice, used as a medical intervention with participants of an eight-week mindfulness-based stress reduction program.

The inquiring of this study is to find out if there are parallel relationships between the processes of mindfulness meditation and the Jungian process of individuation. This study will view individuation through the different stages of what Jungians refer to as the Hero's Journey, or the search of a human being for their true and authentic self. In particular, the following questions will be asked: (a) Does mindfulness impact the relationship people have to their body? (b) Does it challenge and/or shift the perception they have of themselves? (c) In the course of the eight-week stress reduction program, do the participants experience the Hero's journey? Evidence will be presented in a phenomenological study of Mindfulness-Based Stress Reduction Program developed at the Stress Reduction Clinic at the University of Massachusetts Medical Center located in Worcester, Massachusetts.

Chapter two will explore the Jungian process of individuation, which is the process of psychological development that Carl Jung calls the search for the Self. The questions seeking to be answered are: Is there stress in the process of individuation? If yes, where is it? Is it a necessary function of the process? How does stress fit into our personal and collective mythology? Is the process of individuation beneficial to us?

Explored, are Jung's idea of the individuation process, his development of psychological types called functions, and how they relate to our personal and collective mythology, including a close look at the inferior function, which according

to Jung is the most undeveloped part of our personality. This inquiry will investigate the role of the inferior function as it relates to the development, growth and wholeness of human beings as well as our culture. The process of what Jungians call the Hero's Journey and how it particularly relates and is significant to the individuation process will also be examined.

Throughout, there will be a sensitivity to the indications and manifestations of stress, noting where stress occurs if it does, looking at its importance and possible benefits. The purpose is to highlight the role of stress in our personal and collective mythology.

Chapter three will provide an overview of the historical inception of somatic psychology with the works of Wilhelm Reich, Alexander Lowen and Arnold Mindel, with particular interest to the attention they gave the breath in their work. Somatic psychology can be regarded as the infant of psychology, although in theory it may be as old as man's awareness of consciousness.

Prior to World War II, the word stress was almost exclusively used by physicists and engineers to speak about the mechanical use of force and was expressed in pounds per square inch, or by linguists to indicate where the phonetical emphasis was to be placed in the pronunciation of a word. The impact of stress today goes much beyond the impersonal application regarding the subjects of physics and phonetics, and includes personal effects upon the life of all human beings and is the subject of chapter four.

In the forefront of the conversation around stress today are such things as how stress is related to our environment, to the makeup of our personal biological history, and to the development of our psychological and physical makeup as it describes, equates, and pertains to our well being. Stress management has broadened its spectrum to include more than food intake and our daily exercise regimen. We are also looking at some type of inner discipline or intelligence to address the emotional and psychological link with stress.

The discussion and inquiry of this chapter will include the expansion of the concept of stress. The discussion will take a look at the effect of stress on our personal lives and health, and subsequently, the numerous modalities of medicine that have been designed to moderate and treat its physiological effects. Some methods are considered to be part of mind/body medicine. These will be highlighted: the use of meditation as a means to reduce stress, and in particular, the practice of Mindfulness-Based Stress Reduction as modeled by the Stress Reduction Clinic at The University of Massachusetts Medical Center (UMass) in Worcester, Massachusetts will be discussed.

Also looked at will be the serious considerations some professionals have concerning the safety of using meditation and their call for informed consent. Presented will be a review of quantitative research findings that have been published concerning the field of stress and the use of meditation for self-regulation of stress, and the present research which establishes the mind/body connection. This will provide explanation for the link between mind and body, and scientifically lay the groundwork explaining why meditation as a method of stress management is so successful.

Chapter five includes a description of the use of phenomenological methodology to decipher, identify, and analyze the lived human experience. Phenomenological methodology has been chosen because it seeks to understand from an inside or inner perspective, closely aligning this method with the subject matter being investigated. This methodology studies phenomena just as it presents itself to consciousness, whether it is in tangible form or subjectively felt. The immediacy and the transitory nature of this type of research parallels the human episode that is experienced and then recollected. Used will be the works of Giorgi, Valle, Polkinghorne, Halling, and Van Manen to guide the lay out and implementation of this research project.

The design will be implemented through face-to-face recorded and transcribed interviews. The participants selected are ten adults who are graduates of two separate programs modeled after the Mindfulness-based Stress Reduction Program at the University of Massachusetts Medical Center Stress Reduction Clinic in Worcester,

MA. Five participants are graduates from El Camino Hospital Stress Reduction Program in Mountainside, California and five are graduates from the program offered through the Community Health Center of Meriden, Connecticut. The interview is based on the question "How has the practice of mindfulness affected your experience of stress?" Also included here are any limitations of the study including personal biases.

In this chapter, there is also an analyzation and display of the data that has been collected using protocol based on phenomenology as illustrated by Giorgi in working with multiple subjects (Valle, Halling, eds. 1989, p. 52). Included will be a description and documentation of the procedures used to collect the data and a description of the steps used to proceed from the raw data to meaningful units of expression and toward any conclusions drawn. This will allow the reader to inspect the documentation and see if the description is supported by and drawn from the data.

In chapter six, a discussion will take place of the results that are apparent using the themes that have emerged, and their possible correlation to the different stages of the Hero's journey. The data will be probed for possible evidence of a body/mind/spirit connection between mindfulness meditation and individuation.

A summarization will follow in chapter seven of what has been learned by conducting this study. Based on the results, there will be a determination if there is a relationship between individuation and mindfulness-based stress reduction. A "conclusive" (Valle, Halling, eds. 1989, p. 57) argument will be strived for and stated will be any implications of findings for psychological theory and preventative health medicine.

Chapter Two - Jungian Psychology: Individuation and the Role of Stress

In this chapter, the Jungian process of individuation and the stress involved in this process will be explored. The questions to looking to be answered are: Is there stress in the process of individuation? If yes, where is it? Is it a necessary function of the process? How does stress fit into our personal and collective mythology? What are the benefits of the process of individuation? Explored are Jung's idea of the individuation process, his development of psychological types, and how they relate to our personal and collective mythology. There will be a close look at the inferior function which is the least developed part of our personality, as it relates to the development, growth and wholeness of human beings as well as that of our culture. The process of what Jungians call the Hero's Journey and how it particularly relates to and is significant to the individuation process will also be examined.

Throughout, there will be sensitivity to the indications and manifestations of stress, noting where stress occurs if it does, looking at its importance and possible benefits. The purpose is to highlight the role of stress in our personal and collective mythology.

Findings will be a result of what has been learned and gathered through several sources: namely, studies of Jungian concepts through reading Jungian texts and attending classes of Jungian psychology; texts and videos of other Jungian viewpoints; personal experience as a student of this material; and the experience of working with groups around the subject of personal stress.

Individuation in Jungian psychology is the process of the search for what Jung calls the Self. The Self is the organizing center of the psyche, and as an archetype has powerful and inspiring images that come with it. According to Jung, the search for the Self is the search for our relationship with the Divine. James Hall (1979), in *Basic Concepts of Jungian Psychology*, says that "phenomenologically, the Self is virtually indistinguishable from what has traditionally been called God" (p. 45).

Jung relates his own experience of individuation in his autobiography, *Memories, Dreams, and Reflections*. Here, he speaks of his personal experience of God and refers to his life story as “the self realization of the unconscious”. The idea of God began to interest him around the age of nine. At approximately 12 years, he experienced the beauty and power of God as he was coming out of school and standing in a cathedral square. This experience prefigured his life and he believed that God forced him to “think abominations in order to experience His grace” (p. 30).

The process of individuation, as a search for the Self is also much like the Hero's Journey. The actual journey is into an unknown territory which Jung calls the unconscious. This is where we encounter the shadow, that dark, undeveloped side of ourselves. “The shadow coincides with the ‘personal unconscious’ (which corresponds to Freud's conception of the unconscious).” (Jung, 1990, p. 284, par. 513) In the process of the individuation, the self is developed “from an unconscious state to a conscious one” (Jung, 1978, p. 264, par. 418). It is frightening, scary, exciting, and can be a treacherous path to follow. As in the search for the Holy Grail, once we decide, each of us must make this journey by ourselves.

As this author has been studying, and going through the process of my journey, I have noticed there seems to be a great deal of stress involved in this course of individuation. The journey seems to be a search for the Truth of who we are, as if that Truth might be someone else. In reality, the journey that we take is only to find out who we are already. We believe we are searching for someone else or something external that gives us our identity. Unstated most times is that we are searching for God. That seems to be the paradox as we humans realize we have no idea where to start and we are confronted with the necessity to sacrifice something that is so much a part of ourselves, and so difficult to let go of.

Jung used symbols and dreams for assistance in this journey. They tell us many things about our unconscious that are bubbling to the surface for us to look at and to integrate into consciousness. Mindfulness meditation is also a tool to journey inward and explore the mind and how it works, bringing to our attention and illuminating

those illusions we live with. Mindfulness and the process of individuation are about discovering what is already present in our makeup. They do not seek perfection, but the completeness or unity with all parts of our makeup.

My personal inquiry into stress and the individuation process has led me to places I could not even imagine to search for the answer. I also found through my inquiry, that experience is a great and powerful teacher. Examples that Jung uses in his terminology which seem to point to stress are terms such as: separation, holding the tension, conflict, archetypal energy, complexes, conscious/unconscious, and shadow. These will be examined further in the context of this chapter.

Jung distinguishes between the process of a person becoming conscious in growing up and the process of individuation in *The Structure and Dynamics of the Psyche* (1981). He says that there is a long-established difference between becoming conscious and the coming-to-be of the self (individuation). But again and again I note that the individuation process is confused with the coming of the ego into consciousness and that the ego is in consequence identified with the self which naturally produces a hopeless conceptual muddle. Individuation is then nothing but ego-centeredness and autoeroticism. But the self comprises infinitely more than a mere ego (p. 224, par. 423).

James Hall (1986) further clarified Jung's use of the term individuation when he said that it "meant something more profound and more comprehensive than is meant by its use in child development, in reference to the psychological separation of the infant from the mother" (p. 47). Jung defines individuation (1974) as, "the process by which individual beings are formed and differentiated", and particularly the psychological individual as "being distinct from the general, collective psychology" (p. 448, par. 759).

However, Jung insists that individuation leads us out of the isolation of ourselves to have broader collective relationships. This then presents the first paradox. The individual undergoes a process in which he or she differentiates, or acquires a distinct

character from those around him or her, and yet, at the same time leads to a greater and more whole relationship with those from whom he or she is differentiating.

According to Joseph Wheelwright (1971), Jung's idea of individuation is closely related to the development of what he called psychological types and that the formulation of this typology was propelled by Jung's attempt to understand what went wrong between his relationship with Freud. Jung was a student of Freud and as Jung began to publish ideas that were not in line with Freudian thought, a rift developed between them. Jung formulated a structure he called the psyche that represents the total psychic process of both the conscious and unconscious realms of the individual.

In Vol. 11 of the *Collected Works*, Jung describes individuation as a "self reflection that gathers what is scattered and exalts it to the original form of the one primordial man in which the circle of consciousness is widened, where conflicts are made conscious, and sources of conflict dried up" (p. 203, par. 401). What he means by this is that we must come to terms with ourselves and by self reflection know those parts of ourselves that are unfamiliar to us.

The unfamiliar or as Jung calls it, our shadow—the dark unwanted side of ourselves—is what separates us from our whole self. When we connect with the unfamiliar parts of our psyche, there is a heightened awareness or exaltation of our relationship to those scattered parts. Our conflict or separation from the shadow is made conscious and we are in the process of individuation, a lifetime process. This could be reflected in the *Hero's Journey*. It is this journey through the psyche where one discovers the unique nature of oneself as represented in the rites of passage.

The classic study of Arnold van Gennep *Les Rites de Passage* (1908), describes rites of passage as ceremonies that accompany the crises which individuals encounter in their life. These crises serve to provide a means to restore or reawaken life and reinstate the balance of social structures in the life of the individual. Most significant of van Gennep's contributions was the identification that all rites of passage include three stages: separation, transition, and incorporation.

This process of separation, transition, and incorporation have been brought to greater attention in the last 20 years by the work of Joseph Campbell, who refers to the three stages as The Hero's Journey and names them: separation, initiation, and return (1969). In these three areas of the Hero's Journey, a person becomes conscious of what makes him or her the person he or she is and can then be more authentic in relationship to family, friends and the extended community. This indicates that there is an exploration of what is not already or consciously known.

Therefore one must look to the unconscious to find this natural material that Jung refers to as *prima materia* and bring the darkness of the unconscious realm into the light of consciousness. Once there, it must be integrated into one's personal life, and from there to the world one lives in. This is not child's play by any means, but an endeavor to venture into the dark recesses of the unconscious, a vast unknown, to be willing to look at what one finds however unpleasant or seemingly detestable, and embrace it as an aspect of oneself.

When this author entered this program, I soon began to experience a great deal of anxiety. It began to interfere with my performance level and it was difficult to complete assignments and adhere to the schedule I had set for myself. The anxiety showed up in many parts of my personal life as well. This compelled me to examine what was happening by taking that journey into the unconscious. I found a demon that Jung calls a complex. It was this critical part of me that says I should do this degree better than it has ever been done. There was another part of me that began to resist that critical voice. However, a lot of stress and anxiety were produced and I was miserable. Eventually, every time the critical voice would appear, I began to dialogue with it and let it know that even though I heard it, I could no longer give it rule over me and said, "Thank you, but no thanks". This process for me continued over a period of more than six months before I began to realize some real relief and experience less stress for longer periods of time. I have since grown more adept at recognizing the archetypal energy that once paralyzed me. Psychological paralyzation

is a sure sign of the presence of a complex. I now work with more ease and accomplish more in a smaller amount of time.

A complex, for Jungians, is a group of related images that have a common emotional tone and are formed around an archetypal core. For example, images of women: our mother, grandmother, aunts, female teachers, movie stars forming around the mother archetype would produce a mother complex. The complex can block us from individuating and from connecting to the unconscious. The block then sets up areas of conflict which produce stress in our life, as it did in mine.

At the core of a complex is an archetypal energy of an unknown psychic factor. It has a seemingly negative effect on us in that it creates a tremendous tension and carries with it strong emotional energy. It is an energy that has come from deep within the unconscious and will not tolerate any attempt to be grasped either academically or intellectually. We find ourselves behaving in a certain uncomfortable way and wondering "Why did I do that?" or saying "I just don't know what got into me." We feel completely powerless and possessed by something we have no control over and have no idea why we are acting the way we are acting. We want it to just go away and leave us alone!

The archetypal energy of the complex is very elusive, and cannot be changed for the sake of change, and therefore one must circumvent it by looking at the net of associations around it to understand it. One must be willing to experience the frustration and confusion about the unclearness of it all. We must be willing to give over to it completely. All the energy we gather to resist it works counter to our purpose and only serves to feed the complex more power. We literally find ourselves in a foreign territory without a map.

The experience of individuation has been likened to the Hero's Journey. As we take the journey we take it to do the work necessary, that is to bring the elements of the unconscious toward the surface of the conscious. It is not a journey taken with a particular goal in mind. Jung says (1954), "The goal is important only as an idea. The

essential thing is the opus, the work, which leads to the goal. That is the goal of a lifetime” (p. 365, par. 658).

Likewise, the practice of mindfulness is the practice of moment-to-moment awareness without any end in mind, even as the ultimate goal is enlightenment. The purpose of the practice is to become familiar and aware with our mind as it is right now, each time we sit. We sit and practice each time with the focus in the present moment. In mindfulness the practice is the work, which does lead to the goal of self knowing and illumination.

Joseph Campbell in, *The Hero With A Thousand Faces* (1968), illustrates how each of us with our own face goes through the individuation process as a journey undertaken like that of many famous heroes in history. According to Von Franz (1985), heroes show up in many guises, not just the stereotyped fairy tale hero. . . . among the hero-figures there is a great variety: the Dummling type, the trickster type, the strong-man type, the innocent, beautiful-youth type, the sorcerer type, the one who performs his deeds by magic, and others by power and courage (p. 45).

The hero is *“an archetypal figure which presents a model of an ego functioning in accord with the Self”* (Von Franz, 1985, p. 45). This is why, during the hero's journey, the hero seems to some extent be the Self: because he/she ministers to the Self and becomes or manifests the expression of the Self.

In this first stage, Campbell says the hero's journey begins with “The Call.” It appears as an invitation to go toward an unfamiliar direction and separate with what we know our life to be. It may come in the context of relationships or career. One must make a choice whether or not to accept the invitation. It can be set off by a “blunder” or an accidental set of circumstances that seem to make no sense as we just happen to fall into the situation. My stress did not make sense to me. It showed up in an unfamiliar place. I was used to juggling a full time job, along with my studies. I had already relinquished my full time job for my studies and could not understand what was happening.

The Call typically demands a sacrifice from us; usually the separation from old attitudes, beliefs, or ways of looking at our concept of reality. It is accompanied by high anxiety. I found myself going against the grain of everything I believed in or thought was right, as well as against those held beliefs of society. It can be difficult to find support and we may feel as if the floor has dropped out from beneath us and we are helplessly falling. I was called to sacrifice my old beliefs and attitudes of how I approached my studies as well as what I thought I should be accomplishing. I was called to look and see how and why those old beliefs and attitudes no longer fit nor serve who I am as a person. I was challenged to see what could fit. I must admit to being very afraid of “what was happening to me.”

If one tries to refuse The Call, it is as if war has been declared by the Self from the unconscious, and one finds him or herself stopped and without energy. It can seem as if one's life is dead and it can be difficult to get out of bed in the morning. A person may even become ill for no apparent reason.

Sometimes it takes several calls before The Call is heard. It was only when my anxiety got my attention did I listen to The Call and realize that something was not working. I experienced having little energy where once my energy was high. It was a struggle just to get out of bed in the morning and my life was not flowing but had come to a halt. It felt as if The Self was harassing me in all aspects of my life before I woke up to the understanding that something was screaming for my attention. Then I began to look at what I might need to do.

Many times a guardian or guardians will appear in a dream to help the hero through the journey. They will act as a teacher and serve to guide the student. But the guardian will not do the work. We must do that for ourselves as we go through the rite of initiation. The threshold guardians as Campbell refers to them may look strange and dangerous and inhibit easy entrance to this next phase of the journey, for they challenge every limitation the hero clings to.

This attracts or provokes what Jung referred to as four primary enemies or blocks to the path (1954). They are: the demons of our own fear of not knowing what will happen; moments of clarity that prematurely lull us into thinking we have what we came for; power we experience and misuse until we slowly develop respect for it; and old age and death where we fall into set patterns and routines thinking we have arrived at the end and are seduced into complacency.

It is this second phase of the hero's journey called initiation that is so confronting. We have crossed the threshold and are at the point of no return and we have a lot of fear not knowing what is ahead. Jung says that to choose the Journey, it must be a path with heart, and if so, one cannot change one's mind (1954). It is a mystical marriage and union. It is the place that one must let go of all belief of reality as one thinks it to be and step out into the abyss of the unknown. It can feel like an deep unending sea, desert, or jungle; an unknown wild place or alien land, just like Jonah finding himself swallowed in the belly of the whale.

Once we have taken on the task or tasks demanded of us by the teacher to unearth those un-lived parts of ourselves that we have sacrificed and suffered for, we have passed the test of initiation. We find that we have moved to a new level of awareness and clarity. Stripped of our old persona, and old identities, we are unveiled and initiated into new levels of insights and consciousness. We pass through a gateway where confusion tears away, and we are graced with a renewal. This passage opens the way to our own authentic source of wisdom. Here we may be lulled into the misperception that we have got what we came for. This can be a very precarious place as the process is not yet complete.

We are now challenged by The Return, or the final phase of The Hero's Journey, the return to our everyday life. We must now bring our newly acquired awareness and gifts and integrate them into our everyday mundane activities. We will experience newly formed power and will need to experiment with it as a child with a newly acquired skill. We may expect to be awkward and fall, and even misuse our power.

However, this is how we learn to moderate and integrate it as a working part of ourselves.

When I was able to drop my unreasonable expectations of myself, I could do the work connected to my degree with less anxiety. My power with this new tool was irregular and awkward at first. As I kept working with it, I found it easier and more natural to incorporate it into my life. This ability has expanded to other areas of my life. One result is that my appointment book now has more spaces than scheduled dates, and has provided my life with more room for spontaneity.

Going through this process, we encounter a great deal of stress as we consciously endure the conflict of polarities such as good and evil, and turning away from or towards, the dilemma we are in. Opposites coexist within the Self, but cannot be consciously unified. Confusion and chaos can hold court in the form of complexes that are stress producing and that manifest in places where our life is not working as we want it.

Now, I find that I am more able to hold the tension of the opposing thoughts, such as what I want to do versus what I think I should do. Previously, I would feel compelled to have to act or react immediately as the powerful energy of the complex at hand was in control. I now find it empowering to hold the tension. I also find that there are many circumstances that take care of themselves within their own time and which require less of me. I am more free to do those things like hiking, window-shopping, and movie matinees that I seldom used to have enough time for.

Amazingly, I have noticed how there are less things that come up now that I view as stressful. It seems that where there were once oppositional forces within me, there is now a conscious awareness where each can one recognize the other and have a willingness to give mutual respect. The battle for territory has been released to a greater power and a subsequent unifying energy has emerged. I find that wholeness can be terrifying and exhilarating at the same time!

It may be too early for me to become complacent in my new found gift as Jung says we do as things begin to be routine and then perhaps even boring. Boredom is an excellent clue to being in a rut. Perhaps it will be beneficial to be in a rut if I can only recognize it. It will be sometime after that I may once again find myself faced with the challenge of another Call. And the process will begin once again.

Individuation is an ongoing process and is never completely achieved. It is not for us to become perfect, but to become intimately familiar with all our strengths and limitations. Jung (1958) says it is a process of circumambulation. . . around an unknown center of ourselves. . . a spiraling about the real center with approach and estrangement. . . never really connecting directly but always aware of which direction we are moving (p. 384, par. 753).

The words he uses here induce a feeling of tension; spiraling, approach and estrangement, never really connecting. One senses a feeling of tautness and of having to stretch the mind to keep the awareness of the entire process conscious. It's as if at the very moment one can see something new or have a grasp of what one has been searching for, it becomes clouded, hazy and then wavers just out of reach again. Frustration can be very acute as one may sense that one is being played with by something greater.

I have found psychotherapy and my own analysis a valuable assistance throughout this process. The role of psychotherapy is to have great respect for the client's own process, and not to force the client to see his or her complex/pathology within a scheduled time slot or through someone else's agenda. As Jung (1933) says in *Modern Man In Search Of A Soul*, "To the psychologist there is nothing more stupid than the standpoint of the missionary who pronounces the gods of the 'poor heathen' to be illusions" (p. 147).

It is more the therapist's duty to provide a safe place that allows the client time to examine those things that are not working for him or her. Guiding a client through his or her process of individuation can give the client access to healing and a greater

sense of self-awareness. Jung is quoted (1981), "Healing will provide the process of individuation and not necessarily change or alter the personality" (p. 473, par. 584).

This point hit home as I recently worked with a group of court ordered men who are perpetrators of domestic violence. I could only suggest they take the stress reduction techniques I introduced to them for use in their daily lives but I could not make them do it. Initially, some could not even relate to a connection between their having stress and acting violently.

In individuation we can become more conscious of different parts of ourselves by noticing how we feel about things and by paying attention to our dreams. This is how the unconscious surfaces and provides us with many clues. Through my classes and in my sessions of analysis I have been correlating these with Jung's concepts of psychological types.

As stated earlier, according to Joseph Wheelwright (1971), Jung's motivation for formulation of psychological types was his attempt to understand what went wrong between himself and Freud. He developed these types as he studied his clients and found this technique helped him to know and understand his clients better. Once a person discovers his or her psychological type, it can be used to bring increased consciousness to those things and actions that identify that type. Jung's typology is closely related to the process of individuation.

In *Typology* (1974), Jung divided the personality into two attitudes and four functions. This is the basis of what I will discuss here. Extraversion and introversion are the two attitudes which represent the specific direction that the libido, or psychic energy, flows in relation to an object. The object can be anything considered as other.

An introvert's basic disposition to life is the inner world and generally speaking, is most likely to be considered a private person. The introvert will rely mostly on how an external object is perceived and to what feelings and sensations it constellates and

gathers internally rather than externally. An introvert will not seek to find power in the outside world and may even withdraw from it.

However, an extrovert's attitude to life gives power to the outer world and makes decisions based on those things that the world deems important. An extrovert is energized by the outer world and likes to expend energy there. For example, if an introvert and an extrovert were buying cars, the introvert would choose one based on usefulness and good service. He or she might even fax in his or her order. An extrovert, however, might be more likely to choose the newest model available as well as the most popular color of the season.

The four functions may be either extraverted or introverted. The functions represent the ways we adapt to people, places, things and situations. They are thinking, feeling, intuition, and sensation. These typings or categories are intended solely to reveal what best describes the "natural, spontaneous, or typical tendency, as distinguished from how you may wish to be and from what you have made yourself" (Wheelwright, 1971). These types can give us access to information about ourself and others which can help us to better understand our behaviors, and even learning styles.

So we can have introverted thinking, extraverted thinking, introverted feeling, extraverted feeling, and so on. Of these four, one is called superior and is the most highly developed in the individual. We can easily identify it, as Joseph Wheelwright says (1971), by noticing how we are most "prone to getting ourselves out of a jam". Do we think our way out (thinking), observe the situation carefully looking for the weak spot or loophole (sensitive), go by what our gut tells us (intuition), or by asking the question "How can I keep harmony?" (feeling).

The superior function may also be recognized as that which is directly opposite to the inferior function. The inferior function is the least developed and can be identified easily as the one which has a lot of emotional energy around it.

The functions are paired opposites of thinking-feeling, intuitive-sensate. Therefore if thinking is the superior function, feeling must be the inferior function and vice versa. The same applies to intuitive-sensate. They both are nevertheless equally powerful. We can run and operate our superior function with ease, but we can find ourselves being run by our inferior function.

For instance, if thinking is the superior function, we would be very adept at being logical and could find it very simple to figure out the solution to a problem. Since the feeling function is opposite and therefore inferior, we would very likely experience trouble relating to others in our life. The inferior function is said to be the doorway to our unconscious, which is why it is very important to the individuation process.

The other two functions are then referred to as secondary and auxiliary respectively. According to Marie-Louise Von Franz (1993), as one develops these functions to greater consciousness, the direction travels from the superior function such as thinking, to either intuition or sensate as secondary, with the one left being the auxiliary. The function directly opposite the superior function then is our inferior function. In this example it would be feeling.

Von Franz refers to this movement of the development as serpentine, and says that one cannot cross directly over to the opposite function, as they are incompatible. As one develops the secondary towards the auxiliary function, one also combines it with the primary function to make the move easier and more compatible.

For example, using my scores from the Gray-Wheelwright Test, a Jungian style survey of psychological types, feeling is my superior function, score 13, and thinking is my inferior function, score 8. My secondary and auxiliary functions, intuitive-sensation, both carry the same score of 13 as my superior function. Therefore, it is the lowest score of my inferior function thinking that gives me feeling as my superior function.

The inferior function is similar to the archetypal energy of the shadow. Being the least developed function, and located within the unconscious, the inferior function is

the most vulnerable to archetypal energy and is where the shadow will show up to present trouble. Von Franz (1993) believes we all have a social obligation to work on our fourth function since it makes one less dangerous and volatile. The entire society as well as close personal relationships would benefit. To know one's type and being familiar with how it can look for others can help to prevent completely misunderstanding other people. At the least, it can provide clues to how other people operate.

All of this is indicative of the power and stress related to the inferior function. One of the general features Von Franz (1993) relates to the inferior function is that it is slow to assimilate and not easily adapted to society. We would do better to relax our impatience around it and not try to educate it. The slower inferior function can never reach the same level of speed as the superior function. But the danger is in giving up on it altogether, in which case people end up cutting out the fourth function completely and replace it with something that is mechanical. Life is very uncomfortable and the fourth function is, as Von Franz (1993) puts it, "the devil who remains in the corner of their life" (p. 41). This can also apply to the collective, which may then contribute to cultural evils such as the Nazi movement.

Jung says (1969), "if the individuation process runs its course unconsciously, it means no more than that the acorn becomes an oak, a calf a cow, and the child an adult. But if the individuation is made conscious, then consciousness must confront the unconscious. As this is not possible through logic, one is dependent on symbols" (p. 358, par. 755). When I began to pay attention to my anxiety, recurring symbols appeared in my dreams and environment. Examining these helped me to understand what I was experiencing.

Another aspect of the inferior function Von Franz (1993) mentions is that of touchiness and tyranny. When the inferior function is touched upon in any way it easily arouses emotion and feelings of being criticized. People react and appear super sensitive. This can attest to the power associated with the inferior function and the enormous amount of life it holds for us.

There is another world available for us to discover through the inferior function. It may seem a place for adventure, and perhaps that is an indication why we call it the Hero's Journey. But, it is not work for the faint hearted. Von Franz says (1971), . . . the inferior function is really the bridge to the experience of all the deeper layers of the unconscious. Going and staying with it, not just taking a quick hot bath in it and getting out as soon as possible, but staying in it for a long time, effects a radical change in the whole setup of the personality (p. 7).

Myths are not lies or false beliefs in the manner we ordinarily use this word. Joseph Campbell states (1969) the function of a myth is to put mankind in accord with Nature, meaning in harmony with one's inner nature and external environment. Does the stress of individuation serve to put us in accord with Nature? It has, in my experience, put me more in accord with my own nature than I have been in the past.

June Singer (1988) calls it the "vibrant infrastructure that informs" our life (p. xi). The authors of *Personal Mythology* (1988) encourage the development of greater awareness of our own personal mythology through rituals, dreams, and journaling, saying that as we experience increased intimacy with our inner being we will find greater support from our deeper self.

In Jungian thought, the process of individuating draws a person closer to his or her own nature. This requires us to bring unconscious material to the conscious level and experience it. We come to know a great amount of stress as we deal with holding the tension of opposites, conflicts, and archetypal energies. We are constantly being called to take the heroic journey. It seems therefore that when one chooses the path of individuation one chooses to live the myth of stress.

It does appear to be a paradox. When one is on the path of individuation, there is much stress experienced, and as one is integrating the lesson and gifts in the final phase of the Return, there is less stress noticeable. But we cannot get to the final phase unless we take the journey. And to be totally conscious to this journey, I

believe we must also become aware of our body as the very means which gives us life in the first place. We cannot ignore the physical realm and the reality of this organism. We must also become aware and conscious of it physically as well as we become conscious to that part which Jung calls the psyche.

The perspective of body psychology has been set forth by a colleague of Jung, Wilhelm Reich, who is considered to be the father of somatic psychology. The topic of the next chapter is a discussion of Reich's work and his theory of body "armoring". I include a presentation of Bioenergetics which is the evolution of Reich's theory by his student Alexander Lowen, and of the work of Arnold Mindel, called Dreambody which expands the theories of Carl Jung into the realm of the physical body.

Chapter Three - Somatic Psychology: Historical Review of Principles and Methods, **and** **Their Relationship To Stress**

This chapter will provide an overview of the historical inception of somatic psychology and present the works of Wilhelm Reich, Alexander Lowen and Arnold Mindel. This includes a look at comparisons between Carl Jung and Wilhelm Reich, including my personal views and experience of works that are considered to be a part of the umbrella of somatic psychology. Pointed out will be each system's view toward stress and mode of treatment.

Wilhelm Reich is considered the father of somatic psychology. He was a student of Freud, and a contemporary of Carl Jung. It was Reich's belief that our body "armors" (Reich, 1973, p. 145) itself in reaction to stressful situations and begins to form a pattern of chronic muscular tension when we are faced with unresolved emotional problems. He called this theory "character armor" (1973), and said "Its function in every case was to protect the person against unpleasurable experiences" (p. 138). He also recognized that character armor diminished the person's overall capacity for pleasure in life (1973, p. 145). Reich noticed that a patient resisted having his character pointed out to him and would react defensively. Reich concluded that the reason a patient would resist analysis was that the whole personality "fulfills a secret function of defense and protection" (1973, p. 148).

After years of exploring this problem he was clear that "the destructiveness bound in the character is nothing but the rage the person feels, owing to his frustration in life and his lack of sexual gratification" (1973, p.148). When the analyst proceeds into the depth, every destructive impulse gives way to a sexual impulse. The desire to destroy is merely the "*reaction* to disappointment in or loss of love" (1973, p. 148).

Reich came to see that our psychic attitudes of defense, called "character armor" (1973, p. 7), which coincided with the muscular tension or muscular armoring, obstructs the natural flow of biological energy (1973, p. 271). He saw that when

muscular tensions were successfully dissolved “In the process, the characterological inhibitions were loosened simultaneously” (1973, p. 270). Reich proposed the concept of “functional identity” (1973, p. 270) which refers to the reciprocity of muscular armoring and character armoring. He then relied on this reciprocity when working with his patients. When he reached a plateau or elicited little response from a patient when focusing on a somatic or muscular system, he would switch to the corresponding psychic or character correlate.

Each person's body takes on certain structural and muscular form that is characteristic of that person. We might become known and recognized by the way we hold our head or lower jaw, as well as recognized for the stance and posture of our body. Many of us are easily recognized by the way we walk. According to somatic psychologists, the body holds everything we have experienced and recognizes the holistic aspects of body/mind/spirit as being one and the same.

Alexander Lowen was a student of Wilhelm Reich from 1940 to 1952, and his theory of Bioenergetics is based on the work of Reich (Lowen, 1975, p. 11). I recently had the experience of meeting Alexander Lowen as he presented an evening and all next day workshop held at The Naropa Institute in Boulder, Colorado. He is presently in his mid-eighties. His vitality of body and mind is astounding. He was as fresh, and alert at 5:30 PM after an entire day of lecturing and demonstrating his method of working with clients, as he was at 9:00 AM. He is still actively involved in Bioenergetics in New York City, and regularly sails on nearby Long Island Sound.

He stated in the workshop that his basic premise of Bioenergetics is that “the body heals itself” and that “healing is the natural process of the body” (1996). According to Lowen, therapy helps us to identify two things we do to interfere with that natural healing process, how we unconsciously hold our breath, and that we hold our body structure tight (1996). Both of these, though unconsciously done, block the flow of energy between the vital organs of our body and cost us the expression of our personal vitality in all ways, physically, sexually, and emotionally as well as vocally and spiritually. According to Lowen, we have compromised our relationship to

ourselves and therefore to others and to God. We have blocked this energy from childhood and manifest it in a survival pattern that becomes so ingrained we have lost the freedom to act in any other way. At the base of that pattern is a fear so great that if we were to let go of it we would experience the utter terror of death (1996).

Although he used to duck the questions about his belief in God, he was forthright about it during the workshop. When he was younger, he tried to stay away from controversy that would add to that which was already produced by his work. He also feared that the use of the word God would be understood as to be mystical, and therefore taken as not to be embodied. His application of God is not new to his work. He sees God as a “universal force” that does not work from intelligence but rather from our spirit (heart). It is our heart, he says, that guides our life and provides that “universal pulsation”. No thinking is necessary; the basic energetic force in the universe is in us just as it is connected to God (1996).

Lowen's reference to the presence of God in his work, and his defining it to be a universal pulsation and force is intriguing. Is the terror of death we experience actually the terror of being in touch with God? Are our resistances to the therapeutic process created by that terror? From my own experience, I know that as much as I might say that I want to get to the bottom of a problem or the core of the issue, somewhere something happens and I find myself distracted and onto something else. I also find it hard to focus my mind and energy at those times. It is my experience, when leading a group process of any time length, that it is inevitable that several people fall asleep. It is so hard to stay awake to our own life and to move through it consciously. Is it our fear of the power of God? Do we feel it to be so overwhelming a force to experience that we have to shut it off?

Certainly I know and sense that it is when I am very near to a breakthrough of a major obstacle, that it is the most difficult time of all to stay present to myself. My mind keeps floating in and out and I cannot feel grounded to the sensations of energy in my body. If I cannot stay in touch with my sexuality or total physicality of my body, likewise I cannot be in complete relationship to my spirituality, or God. My life force

energy is not vital and I begin to feel depressed, pressured, and held back. The resistance, the tension, the stress gets to be too much to handle, and I begin the chronic pattern of holding it in my body. Reich and Lowen might very likely relate this to being cut off from my sexuality. I am familiar now with those favorite places it automatically gravitates to and the reactive effects it begins to have on my thinking. I am now more able to experience these sensations and be present to them in a conscious way.

When first looking at Reich's principle and theory of sexuality, my immediate reaction was one of disbelief. After studying them and especially after being in workshop with Lowen, I think they are right on the mark, and yet can understand why theirs is not a well accepted theory. Our society is in so much denial of the reality of our physical body that we try everything to make our body fit into a cultural mold. We deprive ourselves of things that nurture us, such as private time alone or a walk out in nature. Much of our available foods in the grocery stores are so refined that it is hard to find its original organic source. How do we expect to find our own source if we cannot find the source of our food? We all are part of this universal force that Lowen says is God, which is available for us to experience when we tap into the pulsating rhythm of our own hearts and bodies. The cultural environment around us is very busy with things other than being in touch with that most personal rhythm Reich and Lowen call sexual.

It is Lowen's belief that "muscular armoring binds the energy that we cannot express and it serves to maintain this balanced economy by binding the energy that cannot be discharged" (Lowen, 1975, p. 15). He says that this balance may be the illusion of our life and that we should learn to express our sexuality, or become aware of it in order to keep the balance. He maintains that the difference between a healthy and a neurotic individual is that the healthy one has a high energy economy that is well balanced, has no limitations and "his energy is not bound in muscular armoring" (1975, p. 15), whereas, a neurotic individual has low energy economy and "maintains a balance by binding his energy in muscular tensions and limiting his sexual

excitement.” “Armoring is setting up a time bomb of illness or disease to occur” (p. 15).

Reich was clear that the breath played a major role in our body armor. His steps in therapeutic treatment were first to get his patient to breathe easily and deeply, and then to mobilize the emotional expression that seemed evident on the patient's face or in their manner. This might be best demonstrated by relaying Lowen's first therapeutic session with Reich.

“My first therapeutic session with Reich was an experience I will never forget. I went with the naive assumption that there was nothing wrong with me. It was to be purely a training analysis. I lay down on the bed wearing a pair of bathing trunks. Reich did not use a couch since this was a body-oriented therapy. I was told to bend my knees, relax and breathe with my mouth open and my jaw relaxed. I followed these instructions and waited to see what would happen. After some time Reich said, ‘Lowen, you're not breathing.’ I answered, ‘Of course I'm breathing; otherwise I'd be dead.’ He then remarked, ‘Your chest isn't moving. Feel my chest.’ I placed my hand on his chest and noticed that it was rising and falling with each breath. Mine clearly was not.” (1975, p. 17)

In this same session, Lowen experienced himself letting out a scream when Reich instructed him to drop his head back and open his eyes wide. The scream stopped when he straightened his head. He repeated this procedure several times and in between Lowen experienced his breathing getting deeper. As Lowen completed that session he left with the sense that he may not be as all right as he had thought. He writes that he began to perceive “things (images, emotions) in my personality that were hidden from consciousness, and I knew then that they would have to come out” (1975, p. 18).

During the workshop with Lowen, as I watched him work with volunteers, the effects of full, deep breathing were very noticeable. The one exercise that Lowen uses with every patient is to extend their arms over their heads and bend backwards over a

padded breathing stool that is approximately three feet tall and resembles the vaulting horse used in gymnastics. At this point he may ask the person to emit a high-pitched scream for as long as they can extend it and then to take some deep breaths before they repeat the scream which is not to be forced. It was easily detected with the participant's bodies where each one was shut off and blocked from the flow of the breath. After each repeated scream, their body would expand with the breath flowing through greater areas of their body. Lowen would point out that the breath was cut off from the chest or the abdomen, and in almost every case, the pubic region. Once they began the exercise, it was fascinating to see the breath dropping deeper into the body.

Lowen says however, that we cannot rely on the breath alone to energize us as a charge to our system. We must also open the avenues of self-expressive movement, as well as the voice and the eyes to facilitate a greater discharge. His emphasis is always first on breathing, then feeling and movement, joined with an attempt to relate the present energetic situation with the life history of the patient.

He believes this therapeutic process is a valuable life tool to be used not to fix something in ourselves, but to assist us as we continue our day to day growth. He personally uses it to charge and discharge on a daily basis. He clearly acknowledges the connection of his work to Wilhelm Reich's and "does not get into all other complicated theories". His views come from his own experience, and he lets a theory resonate with his body and if it feels good, he accepts it, if not, he rejects it, saying "we can truly understand only what we experience"(1996). His own view is to "stay focused in the present"(1996) as he works with a client keeping up a verbal relationship while the body-work is going on.

Speaking for myself, as I have studied and worked with this material, I have come to realize my strong relationship with the history of my body. Childhood memories have surfaced and are showing me the relationship I had towards my physical body. As A five year old, I can remember feeling exuberant and full of energy. Mostly, I felt that way when I was outdoors and running, or rolling down the hill beside my family's

house. I loved the feeling of freedom as I allowed my body to express what I could not find words to say. And it did not even matter that I could not find the words, they were not important. What was important was having that intimate connection with how good it felt to be alive! I would watch butterflies and was mesmerized by the intricate markings of their wing colors. I found great pride knowing I could identify a weed from a plant seedling by the time the secondary leaves began to appear before I was five years old. And, I learned a good lesson of nature when I was stung by the bee which I had caught between my hands to show my mother.

As I look back, it becomes obvious why no one in school could outrun me in the 50-yd dash, and my interest in the physical nature of life is apparent when I look at my teaching career in health and physical education. It is also evident to me that in my classes, teaching was much more than playing a game. I was teaching the game of life every time I was in front of a class or engaged with a student explaining a skill, or just listening to their story. There is no mistake or coincidence of my fascination with Reich's theory of orgasm energy and Lowen's description of the pulsation of life. I have experienced exactly what they describe in a very intimate way during childhood, and in the last eight years as I have been on my own journey to recapture that experience.

I am conscious to the painful awareness of having lost touch with that fully expressed little girl as I became older and felt the pressures to conform to the ideas of the world and the culture. And I am aware that I have experienced many times what has felt like death in order for me to reclaim that core of energy I once had easy access to. Death and rebirth are closely connected, and my experience is that they are the example of the energy cycle that keeps the flow and pulsation moving in my life. What has changed is my experience of them. The edge of difference between them is not so great. When I experience them, it is more that I experience a balance of them. That balance also has an aspect of time. When something happens that is upsetting, the problem affects me for a minor amount of time before I feel the balance of energies return to a more fluid and centered position.

Another major influence in somatic psychology is Arnold Mindell. He was a student of Carl Jung and is known for his theory of the Dreambody (1982, p. 184). A definition of the dreambody is rather difficult to pin down. It indicates as Marie-Louise von Franz says in the forward to Dreambody “that dreams pattern body processes”(1982, p. xi) and she suggests that Mindell’s dreambody is a “reformulation of the . . . idea of the “subtle body” (1982, p.xi). In this line of thought, the subtle body is something more familiar to the Eastern world, and Mindell uses those Eastern methods to explore his dreambody theory.

He says:

“Eastern ritual would call the dreambody the basic stuff of the body, the working substance that transforms into the experience of immortality. The dreambody thus goes by many names such as Shakti (the feminine goddess), Kundalini (or serpent power), Mercury (an imagined substance of Chinese alchemy), and Chi (a subtle energy). More essentially, however, the dreambody is inner body sensations, and connected fantasies “(1982, p. 5).

One can easily observe that the dreambody is no simple thing to comprehend. Mindel became interested in the interaction between psyche and matter when he began to practice Jungian psychology. In 1972, he became mildly ill which motivated him to personally ground the idea of psyche-matter in his body. He was frustrated that he could not deal with his body problems as successfully as he was able to work with his dreams. As he studied the physiological aspects of the body, he grew more frustrated as he tended to intellectualize body problems rather than to experience the powerful reality of them.

It is evident from his previously quoted definition of dreambody that he explored rituals and physical therapies practiced by yogis, shamans and medicine men in countries such as India, China and Tibet. In the view of these cultures, healing is a secondary goal that may coincide with self-realization, the primary goal. All these systems seek to balance the energy of the body through diet, movement, and the

breath. It could be said they view the dreambody as the totality of the life experience of the individual; to them, it is everywhere. This Eastern view is reminiscent of Reich and Lowen's holistic approach to the body-mind and to Jung's theory of the individuation process of self-realization. Mindel's reference to his frustrations due to his tendency to intellectualize the processes and sensations of his body is a possible pitfall in any form of meditation.

This paper addresses particularly the vipassana tradition of Buddhist meditation. This tradition, as do the majority of Buddhist schools, focuses primarily on the mind, and the body's role takes a somewhat diminished status in the exploration in the practice of meditation. Body sensation can tend to be overridden in favor of relating to it through the mind as "just a sensation". To encourage practicing in this manner, keeps the practice located in the upper part of the body, namely, from the neck up. It removes the experience from the lower part of the body, which is where the experience is happening. When we do this, we remove ourselves further away from our center, the hara, which is located in the lower abdominal region. This practice tends to negate any sensation or feeling we are experiencing and thus negates the body itself in favor of the mind only. We are composed of both body and mind. Without the body, there would be no mind. Noted vipassana teacher Jack Kornfield (1993) relates a shift in his perception and relationship to his body after many years of meditation and of being a monk.

"My own practice has been a journey downward, in contrast to the way we usually think of our spiritual experiences. Over these years I've found myself working my way down the chakras (the spiritual energy centers of the body) rather than up. My first ten years of systematic spiritual practice were primarily conducted through my mind. I studied, read, and then meditated and lived as a monk, always using the power of my mind to gain understanding. . . when I returned to the U.S. as a monk all of that fell apart. I discovered, through my relationship, in the communal household where I lived, and in my graduate work, that my meditation had helped me very little with my human relationships. I was still emotionally immature, acting out the same painful patterns of blame and fear, acceptance and rejection that I had before my

Buddhist training; only the horror now was that I was beginning to see these patterns more clearly. . . . I was forced to shift my whole practice down the chakras from the mind to the heart. . . . After ten years of focusing on emotional work and the development of the heart, I realized I had neglected my body. Like my emotions, my body had been included in my earlier spiritual practice in only a superficial way. I learned to be quite aware of my breathing and work with the pains and sensations in my body, but mostly I had used my body as an athlete might. . . . I discovered that I had used my body rather than inhabiting it. . . . I had to move further down the chakras. I learned that if I am to live a spiritual life, I must be able to embody it in every action: in the way I stand and walk, in the way I breathe, in the care with which I eat. All my activities must be included. . . . In as my practice has proceeded down the chakras, it has become more intimate and more personal. It has required more honesty and care each step of the way. It has also become more integrated. The way I treat my body is not disconnected from the way I treat my family or the commitment I have to the peace on our earth” (pp. 6-8).

Mindel looks at the dreambody as the relationship between our dreams and our body's dilemmas. He believes that we can begin our own individuation process with a “big dream or a terrifying symptom” (1985, p. 3), and that the dreambody can directly say to us “Disease and death—or change and individuation” (1982, p. 200). It is left to us to hear and respond to the message. Most people need to encounter a serious illness or the loss of a relationship to begin to pay attention. As I indicated earlier, his own illness is what brought Mindell to explore what he would call the dreambody. Through his exploration, he read the written works of medicine and Western psychology, including Wilhelm Reich. He felt as though most therapists were manipulating the body to fit their own theories and wondered what would happen if the body were left alone to continue its own natural process? What might it do or have to say? With observation he noticed that the body amplifies its own symptoms to make them greater.

This observation led him to discover that amplifying the body's symptoms is important to understanding the meaning of the problem or disease. Mindell's work

with the dreambody includes the knowledge of many modes of psychological work which he utilizes under the framework of “process work” (1985, p. 2). He bases it on uncovering the exact mode his client is operating in and follows that process whether it be diagnosed “psychotic, terminal, group oriented, diseased or normal” (1985, p. 2). At the time he was working with terminally ill patients who “In particular . . . showed me how to ‘amplify’ somatic processes, and helped me to define the dreambody” (1982, p. 2). In particular he had a patient who was hospitalized dying of stomach cancer. The man was able to tell Mindell that his stomach tumor was intensely painful. So Mindell asked his patient, who had been unsuccessfully operated on and diagnosed terminal, to try something new. The patient agreed and Mindell encouraged him to try to make the pain worse. The man said he could and said the pain felt like something was trying to break out. He exaggerated the pain until he burst out saying “Oh Army, I just want to explode, I’ve never been able to really explode!” Then he began to explain how he had never fully expressed himself. He asked Mindell to help him explode. Mindell agreed to this. This man improved to leave the hospital and work with Mindell for several years exploding and learning to express himself more fully before he died.

Prior to his hospitalization, the patient told Mindell of a dream in which he had an incurable disease and that the cure for it was like a bomb. Mindell realized that the bomb in the man’s dream corresponded to the cancer in his body and that his body was exploding with cancerous pain to express itself. This is when Mindell understood there must be something like a dreambody that expresses the body and dream together. Mindel amplified his patient’s body or proprioceptive experience through the explosion that his body was naturally trying to express.

Mindell states in Working with the Dreaming Body:

“Amplification makes the term dreamwork theoretically no different than the term bodywork. Both dreams and body phenomena are simply pieces of information coming from the dreambody’s visual and proprioceptive channels. Dreambody work does not even need the terms dream, body, matter or psyche, but instead, works with

processes as they appear. This work is based upon the exact information according to its channels. The therapist's only tool is his ability to observe the processes. He has no pre-established tricks or routines. This makes his work unpredictable and related only to that specific individual situation which is happening. For me, process work is a natural science. A process-oriented psychologist studies and follows nature, while a therapist programs what he thinks should be happening. . . . I simply look to see what exactly is happening in the other person and what happens to me while he is reacting. I let the dreambody processes tell me what wants to happen and what to do next."(1985, p. 9)

It is clear that Mindell believes in allowing things to take their natural course whether that indicates pain and possible death or the experience of the emotion that is present. It is also clear to me that a therapist would have to have done a great deal of their own work to be able to guide the client to the brink of fear and confront their experience of death. We cannot be a guide in territory we have not yet explored ourselves.

Alexander Lowen also corroborates this as he states that issues clients experience with the therapist are due to the failure of a depth of understanding on the therapist's part frequently due to the therapist not having addressed his or her own problems. He says almost anything will work if the patient "feels the therapist is trying to understand them, comes clean to the process and offers one's own humanity to the relationship." He recommends to therapists, "stay with yourself and your issues, and have a commitment to your own growth and integrity" (1996).

It is dynamic and stimulating to see such figures as Reich, Jung, Lowen and Mindel, and be privy to the process they have gone through, and in the cases of Lowen and Mindel, still evolving in their work. The parallels of their lives is a lesson in what they teach and profess. Lowen and Mindell are living contemporaries. Reich and Jung are past contemporaries whose work has had great impact on the psychological world we experience today in comparison to that of their day and before that.

Bodywork has greatly expanded into the area of healing the body/mind using innovative techniques to enhance the healing process. Those techniques are being explored in some U. S. hospitals. Examples are Mid-Columbia Medical Center in Dalles, Oregon where massage is used prior to surgery to help relieve patients' anxiety, and at Dallas County Hospital District-Parkland Memorial Hospital, Dallas, Texas where it is routine nursing procedure to provide touching and to facilitate psychological bonding between parents and infants in the neonatal intensive care unit as a means to encourage the underdeveloped infants to thrive (Sabatino, 1993, p. 66).

There have been numerous somatic works I have engaged in during the last eight years. What is basic to those that I have felt most connected to, is their use of the breath and the integration of the breath with movement. In Aikido, the entire model of energy flow is present for me to work with and the opportunity to practice with a partner serves as a mirror for me to experience exactly who I am being at that moment. Combining the breath with deep rhythmic music in Stan Grof's Holotropic Breathwork has provided a rich experience of body awareness I haven't felt with other work I've done. The sound-body work I have trained in allows me to "sound" my body in a way that separates what is mine from what is not. Through techniques in sound, I can let go and release the stress that is produced by holding onto what is not in tune with my body.

These tools provide the opportunity to integrate breath, movement and energy into the system of my life. These works in combination with my own regular practice of mindfulness meditation serve to provide me with the ability to recognize and be aware of what is happening in my body and the effect my thoughts and emotions might have on it. I also have access through my awareness of my breath to be able to center and find that place of balance in my experience of everyday stress. This is the topic of the next chapter, stress and methods for dealing with it in a positive way for today's living.

Chapter Four - Stress : Review of the Literature

Today it is a common occurrence to hear the word stress included in our everyday language. It appears as a highlighted topic of many TV news and information-based shows, and competes with the stories of Hollywood's most popular stars as the featured article on magazine covers. This is more a recent phenomena since stress has not always been related to something that has to do with human beings. Most people are aware that the medical profession considers stress to be an important factor in our health and well being, and in an attempt to manage stress, I believe that many try to eat balanced meals and exercise regularly. Even if they are not as successful as they would like to be over the extended period of time, they are however, aware of the positive effects those measures can have and at the least have some good intentions toward incorporating them into their lives. Stress management has broadened its spectrum to include more than food intake and our daily exercise regimen. Many are also looking at some type of inner discipline or intelligence to address the emotional and psychological link with stress.

The discussion and inquiry of this chapter includes the historical tracks of when the concept of stress expanded to include its effect on our personal lives and health led by the research of Walter B. Cannon and Hans Seyle. In addition, will be discussed, the numerous modalities of medicine that have been designed to help us understand and deal with it's physiological effects. Some methods are considered to be part of mind/body medicine. The use of meditation as a means to reduce stress will be highlighted, and in particular, with the the practice of mindfulness meditation for stress reduction developed and taught by Jon Kabat-Zinn, Director of the Stress Reduction Clinic at the University of Massachusetts Medical Center. Submitted will be the serious considerations some professionals have concerning the safety of using meditation and their call for informed consent. A review of quantitative research findings will be presented that have been published concerning this field, as well as present research which establishes the mind/body connection, thus providing explanation for the link between mind and body, and scientifically laying the

groundwork that explains why meditation as a method of stress management is so successful.

In 1914, Walter Cannon (1932) termed the phrase “fight-or-flight” to describe the body’s response to threat, which includes arousing nearly every physiological system in the body. He noted that the body prepares itself to deliver two immediate reactions: to fight and battle against the forces that are attacking, or to take flight from those forces and flee from their onslaught, thus the fight or flight response. Some of the physiological reactions he discovered included increased blood pressure, heart rate and perspiration, as well as increased muscular strength and the intensified production and release of serum glucose for metabolic processes during muscular contractions. He documented the intricate preparation of major systems of the body to respond to an attack against it. Perhaps the unfortunate thing for us is that while it may be necessary for our body to be prepared to defend itself, our body, however, does not distinguish the difference between a real threat or a perceived threat and calls up all it’s forces to combat the threat in either case.

It can be likened to an amateur competing against a professional in a local tennis tournament when another amateur player is the more appropriate opponent, or if in the defense of our nation, we were to always employ nuclear weapons against any kind of threat to the peace of our country when instead, negotiations might be the order. With our body always in this type of overkill reaction mode to stress, it does not have the opportunity to return to a place of balance and rest that Cannon called *homeostasis*.

Homeostasis is the ability of our body’s systems to maintain a functional level of service with consistency and equanimity. In other words, use just the appropriate amount of resources to get the job done and then return to a balance or homeostasis. I like to think of homeostasis in the context of a tennis player in a tennis match, whose goal after returning the ball to his or her opponent’s court, is to comeback to a ready position as close to the center court line as possible in order to successfully hit the next ball back into the opponent’s court. This position of readiness or centering

may be accomplished quickly and easily, or it may take every bit of effort to achieve. Once the player has lost the ability to return to this place of readiness, the opponent has won the advantage in the game and the point may very likely be lost. Just as it is in the game of tennis, so it also is in respect to the way we play the game of life as it pertains to us dealing successfully with stress.

Knowing that place of our own center and learning how to return to it is a very key ingredient in managing our stress. Stress is not necessarily a bad thing. If it were, then we could also say that no stress is a good thing. We all know of some experience where we have been under some kind of pressure to do something in a certain amount of time, whether it is writing a paper for a masters program or preparing our income tax return, and when it was completed, we have felt the sense of accomplishment and power that comes from rising to the challenge. Striving and goal setting although they may be stressful, are also what makes up the experience of creative living and gives us a sense that we are playing on the court of life. Noted endocrinologist and researcher Hans Seyle comments that: "Stress is not necessarily something bad. It depends on how you take it. The stress of exhilarating, creative, successful work is beneficial, while that of failure, humiliation, infection is detrimental. The stress reaction, just as energy consumption, may have good or bad effects" (Seyle, 1978, p. 63).

We have popularized the concept of stress relative to illness and disease since it was coined by Hans Seyle in 1966. In his research, Seyle (1978) discovered there was a biological connection with the defensive reactions of the hypothalamus, adrenals, and pituitary and the physiological responses that precluded disease. Using rats as subjects, he researched Cannon's fight or flight response and the physiological effects of chronic stress and noted that over a prolonged exposure to stress, the rats developed several physiological adaptations that were subtly pathological and consequently were not noticed until permanent physiological damage had occurred. The physiological dangers of stress that he outlined through his research included significant decrease in the white blood cell count, bleeding in the stomach and/or

colon, adrenal enlargement, atrophy or shrinkage of the thymus, spleen and lymph nodes, and death of the organism.

He referred to these changes as the *general adaptation syndrome* (G. A. S.), a process of stages by which the body responds to a stress stimulus by adapting to it. He found three stages of adaptation: Alarm-Reaction, Resistance, and Exhaustion. The Alarm-Reaction stage is the initial response and a call to arms of our defense systems, which is similar to Cannon's fight or flight response. In the next phase, called Resistance, our body attempts to return to homeostasis as it tries to downgrade the alarm stage and regroup at a lower level of physiological arousal. There is enough continued physiological response to cause a higher metabolic rate in some organs that in effect has them working overtime and which leads to the third phase, Exhaustion. Through the prolonged effect of working overtime, the targeted organs can no longer meet the demand of defense and they begin to break down resulting in dysfunction and possible death of the organ. If the organ is the heart or liver or kidneys, this stage can possibly result in the death of the entire organism. In the latter case of resulting dysfunction through continued exposure to stress, all three stages will have developed. However, in most cases we experience only the first two stages from a limited amount of exposure. Seyle commented that these diseases of adaptation: ". . . are actually not so much the direct results of some external agent (an infection or intoxication) as they are the consequences of the body's inability to meet these agents by adequate, adaptive reactions, that is, by a perfect G.A.S." (Seyle, 1978, p. 83).

Through his discovery of the G.A.S., Seyle opened the way for us to understand the connection between stress and disease and: ". . . his work laid the foundation for the utilization of relaxation techniques that have the ability to intercept the stress response, thereby decreasing susceptibility to illness and disease." (Seward, 1994, p. 15)

During the early 1970's, Dr. Herbert Benson and colleagues of the Harvard Medical School conducted a study on people practicing a form of meditation that produced

significant physiological changes in the body, which he called *the relaxation response*. These changes include reduction in oxygen consumption, decreased heart rate, breathing rate and blood pressure, and reduction in serum lactic acid levels, that are combined with increased skin resistance and alterations in blood flow (Wallace, Benson, Wilson, 1971, p. 796). In 1979, the Stress Reduction Clinic at the University of Massachusetts was founded utilizing mindfulness meditation as the method of relaxation. This writing be going into depth about the effects of meditation used in stress reduction models further on in this chapter.

Under professional criticism that Seyle accorded stress to be it's own cause, he was forced to create a new word to separate the cause of stress from the syndrome, and introduced the new word *stressor* for the causative agent and retaining stress for the resulting condition. It is a common understanding today, however, to use the word stress to indicate both the syndrome and the agent. Since many things can trigger the G.A.S. response: *Stress is the nonspecific response of the body to any demand, whether it is caused by, or results in, pleasant or unpleasant conditions . . . (and although stress) . . . shows itself as a specific syndrome, it is nonspecifically induced (Seyle, 1978, p. 74).*

He categorized *eustress* or good stress, and *distress* or bad stress, declaring that although both elicited the same nonspecific response, eustress causes much less damage. *Stress cannot and should not be avoided. Since stress is the non-specific response of the body to any demand, everybody is always under some degree of stress (Seyle, 1978, p. 63).*

It is this body connection that has interested me throughout my life and shaped my career of teaching health and physical education. More recently, during the last seven years, my interest has expanded to study the mind/body connection, and I have been certified in the areas of Therapeutic Massage, Reiki, and MariEI. Reiki and MariEI are healing methods which help to open blocked energy pathways in the body. Reiki (pronounced Ray-Key) is the word for the Japanese symbols meaning "universal life-force energy". It is a hands-on healing method derived from the ancient healing

secrets of the Buddha as revealed to Dr. Miako Usui, a Japanese monk in 1850. The Reiki System is a natural holistic energy therapy for restoring and balancing the vital life force energy. MariEI is a heart-centered energy taught by Ethel Lombardi since the early 1980's. This therapy helps release blocked energy on the cellular level and restores balance and vitality to the body. Both systems of Reiki and MariEI are very gentle, non-invasive therapies that are described as producing peace and relaxation.

I have also studied several methods of breathwork including Rebirthing and Holotropic Breathwork, and presently I am a student in the areas of somatic, depth, Buddhist psychology, and Mindfulness-Based Stress Reduction. All of these have served to inform me further and to know myself more thoroughly both in body and mind. Studying these areas includes the experience of learning about what I might consider to be the more positive and the not so positive aspects of my makeup.

Each time I have opened another door or challenge, I have encountered an enormous amount of stress and through it I have learned very valuable lessons. It is the fine balance between conflict/resolution, like/dislike, feel great/feel lousy, and the patience and compassion to be with them all in their own time that provides me with the ability to return to that place of center within a much quicker time-frame. I am much less likely to react impulsively to try to fix something that I am uncomfortable with, and I am more likely to view it as part of the whole natural occurring cycle of my life. My physical and emotional health rests on much firmer ground that provides me with a powerful base to draw from and to experience a conscious awareness of my natural circadian rhythm and flow. I am conscious of the natural pacing of my energy level, my moods, what affects my daily diet, when I am operating in subtle situations of stress, as well as performing in high levels of stress.

E. Rossi (1991), in "How to Create a Great Day" discusses the many ultradian rhythms that occur within an overall 24-hour circadian period and outlines the body systems that are at work and at rest during each of these ultradian periods. The ultradian periods last for several hours and are regularly interspersed throughout our day. In our western culture we have a common practice of expecting ourselves to operate at

top performance level the entire day. For many of us, this regularly translates into 12-14 hours of prolonged peak performance, and even longer hours for others. When we cannot achieve this rigorous expectation we have of ourselves, we feel guilty for not being able to meet the self-inflicted standard.

However, Rossi shows that we have peaked after a period of 90 minutes of top performance in outer world tasks. Stress has accumulated and our mind moves into a natural period of healing that he calls the *ultradian healing response*. At this time, we are best suited for inner world tasks and our body is naturally geared to move into a 20-minute rejuvenation or rest period. If we habitually override our need for that healing break, we are setting ourselves up for what he calls the *Ultradian Stress Syndrome* which leads to the malfunctioning of organs and systems and all the problems that are stress related.

Another important factor he brings to the forefront is related to depression and a newly recognized condition called Low Amplitude Dysrhythmia. If we do not reach a high enough peak performance of activity during the day to be fully awake and alert, then we cannot reach a low enough Slow Wave Sleep at night that enables us to release growth hormones. This also affects immune system factors that lead to our health and well-being. This could verify the rewards of a daily exercise regimen that has aerobic value. It would include any number of different physical activities such as walking, jogging or biking which increase the heart rate to a safe target level for an extended period of time, from five minutes for a beginner and building up to as long as thirty five to fifty minutes.

In accordance, Seyle mentions that we can become intoxicated or addicted with overstimulation. Peak experiences provide a feeling of being high and even euphoria, and many of us find ourselves wanting to experience that feeling again and again. So by our own choice, we set up the circumstances to be able to play it out over and over. Some choose to work longer hours, take on a second or third job, or even play the high risk futures market. The psychochemical basis for this is that our adrenal produces an excess of adrenaline and corticoids, hormones that have a practical value

for us to have peak performances. However if we do not learn to key down and return to that homeostatic mode, we can become intoxicated with our own stress hormones which have serious and far reaching affects. . . . *this sort of drunkenness has caused much more harm to society than the alcoholic kind. In our actions throughout the day we must consciously look for signs of being keyed up too much and we must learn to stop in time (Seyle, 1978, p. 412).*

Unless we learn to tune down, we are entering a state of chronic stress and pushing into the realms of the third stage of the G.A.S., Exhaustion. Seyle goes on to say: *Man must work, but to do it most efficiently he also has to relax periodically. If we are just doing too much, the problem is one of excessive general stress. It cannot be handled either by deviation (the frequent shifting-over of work from one part to another) or by more stress; the great remedy here is to learn to relax as quickly and completely as possible . . . a number of techniques have been developed which help us to diminish both mental and physical activity to the absolute minimum still compatible with survival . . . methods of achieving self-induced states of altered consciousness - TM, yoga, Zen, self hypnosis, relaxation response where total relaxation is accompanied by increased mental alertness (p. 420-433).*

Seyle proposes the challenge to: *Find your own natural stress level. People differ with regard to the amount and kind of work they consider worth doing to meet the exigencies of daily life and to assure their future security and happiness. Only through planned self analysis can we establish what we really want; too many people suffer all their lives because they are too conservative to risk a radical change and break with traditions (p. 452).*

It is important for us to come awake to the presence of our natural instinctive rhythms and cycles and take a rigorous and blatantly honest look at how much energy we are using to deny our own intrinsic powers of healing. By spending time, time in which we venture inward on a regular daily basis, we can learn to listen to the natural rhythms of our body and be receptive to synchronizing our life with them. We need to become aware of how we still think of our bodies as simply machines. We are

not machines! We must recapture the awe and connection with what our body habitat really is. And by that, see that we are the best source of knowledge about ourselves. This knowledge is personal and learned best by balancing the time spent with both internal and external activity that is not thinking oriented; a place that is quiet and renewing, a place within to stop and listen. As pointed out by Seyle, there are several methods available to help us to learn how to return more quickly to homeostasis, or as suggested by Rossi, a place to heal regularly.

In the late 60's and early 70's, meditation began to be examined by the scientific community as more than a way to enlightenment. Herbert Benson, now known for the Relaxation Response, along with a team of medical researchers headed by himself and Robert Keith Wallace (Wallace, Benson, Wilson, 1971), did some research on the effects of Transcendental Meditation (TM), a simplified method of meditation developed by the Hindu Maharishi Mahesh Yogi who brought it to the United States in the late 1960's. They proved that it was an effective mediating method for dealing with chronic stress. The research included 36 participants who were already trained in TM to practice TM for 3 periods of twenty to thirty minutes each. Measurements were taken before, during, and after these sessions. Their findings soundly indicated a reduction of oxygen consumption, decreased lactic acid levels in the blood, lowered heart rate, breathing rate, and blood pressure. The study demonstrated that TM did in fact induce a profound state of physiological homeostasis (Wallace et al., 1971). TM is one of the methods of meditation that uses concentration, and in this case the meditator repeatedly focuses on a special word or mantra.

There are two major classifications of meditation practices: concentration, such as TM as previously mentioned, and mindfulness meditation. The main difference between the two is the application of the use of attention. Mindfulness meditation is the basis for the outpatient program for the stress reduction program at the University of Massachusetts, which opened its doors in 1979 as the first hospital based clinic to use meditation in the application of stress reduction. The program is presented in eight-week cycles and helps patients to cultivate concentration and relaxation just as TM does. However, it differs from TM in that mindfulness also trains participants to

pay attention to a greater field of focus with a moment-to-moment awareness rather than focus on a single word, sound, or mantra. This field of awareness includes the breath, sound or hearing, feelings or emotions, and sensations. The practitioner is trained to practice awareness of each of these fields, first separately, and then to open their awareness to include all of them, a technique called choiceless awareness. Founder of the Stress Reduction Clinic, Jon Kabat-Zinn chose this meditation method, called *vipassana*, because of, . . . *its immediate applicability to a great variety of present moment experiences (which) lends a quality of "ordinariness" to the intervention that makes it more acceptable and accessible to a wide range of people with different life stressors and different medical disorders (Kabat-Zinn et al. , 1992 p. 937).*

A major theme of Kabat-Zinn's model is its ability to bring mindfulness to any stressor that the participant may encounter in their daily life such as anxieties about work responsibilities, family relationships, and even to facing chronic pain, panic disorder, or a terminal illness. Mindfulness, as used in the University of Massachusetts clinic, is derived from the ancient Buddhist practice of mindfulness that is rooted in Theraveda Buddhism, a system that is practiced in Southeast Asia and the countries of Sri Lanka, Thailand, Burma, Laos and Cambodia. It is the technique of Vipassana (insight or clear awareness) from the Theraveda tradition that allows the meditator to study his or her own mental activities and changes in feelings and perceptions. This ancient practice is derived from the ancient text the *Tipitaka*, a three-section collected work that preserves the Buddha's original teachings, one of which, *Satipatthana Sutta*, teaches The Foundation of Mindfulness (Thich Nhat Hanh, 1976, p. 111). Today, most Theravedan Buddhist meditation teachers rely on the Tipitaka as well as the personal experience of their own meditation practice. This practice of drawing from one's own experience is fostered and emphasized in the internship training program at the clinic for those who are drawn to teach this work. *Meditation is a living activity, an inherently experiential activity. It cannot be taught as a purely scholastic subject. The living heart of the process must come from the teacher's own personal experience (Gunaratana, 1993, p. 2 - 3).*

Kabat-Zinn is adamant about this point. When a health professional takes one of Kabat-Zinn's trainings, the first thing that he or she learns is the practice of mindfulness. Dr. Kabat-Zinn presents the teaching as something which must be experienced and practiced over and over again on a daily basis. The professional course mirrors the essence of the eight-week program for patients in the fact that practicing makes up the greater context of both. Having attended several of his professional courses, I have observed myself and others become impatient with the practicing and become anxious to get to the real stuff, the real material of how to teach this stress reduction. It takes some longer than others to understand that Kabat-Zinn means what he says, that to teach this work, it must come from the teacher's own daily practice. He does not tell anyone how they are to teach it, he only provides the precursor so to speak, and it is for each one of us to come to that place and understanding by our own practicing. We must walk our own path with the practice in order to witness and be present to anyone else's walk.

In the stress reduction program at UMass the vipassana or insight practice is divested of religious connotations and it is simply the practice of moment-to-moment awareness that is the heart of the exercise. The participants of the program attend weekly two and a half hour classes and are expected to spend 45 minutes a day, six days a week practicing mindfulness using the guidance of audiotapes. In a pre-interview, an applicant to the stress reduction clinic is well informed of the rigors of this program and of the intense practice that is required as their homework. The program soon demystifies the idea that meditation is not for ordinary people, or that in meditation we do not have to pay attention.

Program participants find out that to practice mindfulness meditation they do not enter a trance state, or bliss out to escape from the hardships of their life. Most of us are oblivious to the fact that our mind is on automatic pilot and that we are not in the driver's seat. We are being driven by something that we are not even aware of and we seldom slow down long enough to be able to see that. The pace of our lives is so frantic that we have little awareness of the experience of what is going on right now in this moment. Our minds are usually too busy thinking ahead to what we think we

need to do next or judging ourselves by what we think we ought to be doing. Actually, this is exactly what does go on in our minds, but being mindful reveals that and then allows us to make informed decisions concerning our life.

As Thich Nhat Hahn expresses, meditation is not the same thing as doing nothing, watching TV, or for that matter resting: "Sitting in mindfulness, both our bodies and minds can be at peace and totally relaxed. But this state of peace and relaxation differs fundamentally from the lazy, semi-conscious state of mind that one gets while resting and dozing. Sitting in such lazy semi-consciousness, far from being mindfulness, is like sitting in a dark cave. In mindfulness, one is not only restful and happy, but alert and awake. Meditation is not evasion; it is a serene encounter with reality. The person who practices mindfulness should be no less awake than the driver of a car; *if the practitioner isn't awake he will be possessed by dispersion and forgetfulness, just as the drowsy driver is likely to cause a grave accident. Be as awake as a person walking on high stilts - any misstep could cause the walker to fall. Be like a medieval knight walking weaponless in a forest of swords. Be like a lion, going forward with slow, gentle and firm steps. Only with this kind of vigilance can you realize total awakening (Thich Nhat Hanh, 1976, p. 60 - 61).*

It has been times as these of such awakesness in my life that I have experienced exciting and precisely memorable experiences. My own practice of meditation has made those kinds of experiences available to me every day. For instance, recently as I was driving from Mendocino, California to the San Francisco area to my internship, I found myself feeling pressured to go faster than the speed limit, pushed by my anxiety of not wanting to be late, and the closeness of the cars and trucks that were following me on a winding two-lane road. In my mind, I was already through the winding mountain road and on the interstate with a 65 mph speed limit. Realizing that I was tense and feeling like I was in a race, I decided to safely pull over and let everyone pass me. I did this each time someone was behind me. I also slowed down to the speed limit and literally began to tune into my breath.

Soon my anxiety dropped away and I felt less tense and more aware and in control. I also became more aware of the beauty of the redwoods surrounding me. I could soak up with my senses the shafts of sunlight through the trees, and then moments later, just as I came around a bend in the road, I saw a single fallen leaf tumbling down a hill on my right. It was like having telescopic vision: expansive, broadening vision, open, far seeing, yet fine pointed.

The moment was vivid, and breathtaking. I reflected that I had been in the area less than two weeks and already my senses were dull to the beauty of the region. I was already taking the redwoods for granted. I was not seeing them as I had the day I had arrived driving down the same highway, and being so overawed by their presence and majestic beauty, I had to stop twice to sit among them. Amazing how little time it takes for us to be distracted from mother nature as well as from our own natures, to place priority on some thing or some place to which we have not even arrived. I could then understand how it is that we become so desensitized, that without thinking or full awareness of our actions, we cut this forest down without consideration.

Mindfulness first teaches us to be able to follow the flow of our breath. For me, this is a most profound experience. When I inhale and bring my awareness to the feel of the air entering through my nose and then inflating my lungs, I am wide awake with the experience and the feeling that it gives me in my body. I am present to the miracle of living and my connectedness to life through this delicate yet mundane process that each of us performs under resting conditions over 20,000 times a day.

After regularly practicing mindfulness for a few months, the awareness of my breath flowed over into my ordinary activities and I was amazed to discover that often I was not breathing and that in fact, I was holding my breath. It was a big clue, which pinpointed places where there was stress in my life that previously I was ignorant to. A whole new window of awareness opened for me. It was a revelation in reality to see aspects of my life that I had no idea existed before. Seeing that, I began to wonder what else may be hidden from my awareness, and became alert to that possibility in

all areas of my life. It became an adventure in self-discovery and of what I began to look upon as my own frontiers, an adventure that keeps unfolding.

To bring mindfulness from the formal sitting practice into informal, everyday practice was like being let into a huge secret. I began to be present to an inner intelligence, a force of my own wisdom that did not include having to know the latest piece of technological information to prove I was intelligent, or the need to look to others for agreement and validation of who I am. In an address to a conference on contemplative practices and their relevance to society, Kabat-Zinn says: *I would suggest that it is now time for society to turn attention to developing what we may call "inner technologies". The untapped potential of the human mind for individual and collective creativity and wisdom has to be intentionally cultivated. . . if it is to keep up with the precocious challenges of our technological advances without losing all sense of value and meaning in our individual and collective lives (Kabat-Zinn, 1995, p. 16).*

Many people who do the stress reduction program also report feeling better about themselves (Kabat-Zinn, 1982, p. 45). Kabat-Zinn also remarks: *Once one has been exposed to this approach in a formal setting, the application of moment to moment mindfulness to one's life experience has the potential to modify the way one perceives one's self and one's experience. It can also influence how one responds to pain and stress. In this regard, an ability to use awareness of one's breathing in daily life (AOBDL) as an anchor for moment-to-moment awareness and as a reference point for responding with awareness to pain or to stressful situations becomes particularly relevant, since this is by far the most popular and most used meditation technique among our patients (Kabat-Zinn, unpublished) and can be done under almost any circumstances (Kabat-Zinn, 1987, p. 171).*

The program, known as the Stress Reduction and Relaxation Program (SR&RP) uses mindfulness meditation training as the self regulatory activity and coping strategy for patients with long term chronic conditions which include chronic pain, anxiety disorders, panic disorders, insomnia, and medical disorders such as headaches, heart

disease, cancer, and AIDS. The program is intended to be used in conjunction with traditional health care, and most patients are referred by their physician. Many of the patients have reached the limits of the scope of assistance that traditional medicine has to offer.

An important point in the practice of mindfulness is to clarify the idea of detached self-observation and non-thinking. The object is not to stop thinking. It is however, for us to discover that: we continually are thinking, acknowledge that, and then to let go of whatever attachment to that thinking we may have. It is seeing the thought come up, and letting it come into focus if need be, that gives us the reins and provides the discipline which flows over into our informal, active life and furnishes us with the ability to experience the expansiveness and freedom to move, whereas before, more than likely we felt stuck in a rigid and stressful lifestyle. Detached observation more describes the attitude to allow whatever is present to arise in the mind and not to judge it. Allow it to be the object of momentary awareness until whatever thought, sensation, memory, idea, opinion, or desire may next come to the forefront. The point is that we do not have to follow that thought down memory lane, or develop that idea, or complete that to do list. We can simply rest in bare attention with the present moment of nothing to do and nowhere important to go. Admittedly so, this is what is possible and it does take discipline and training to keep reminding ourselves to come back and to return our attention once again to the breath. It becomes quickly obvious that our mind wants to do its own act, which is mostly about remembering the past, or planning for the future, and least of all being grounded in what is happening in the present moment. By consistently returning the mind back to now helps to train the mind to be less agitated and restless.

As the quality of bare attention develops, noticing what's happening in and around us, we begin to experience and respond to the present with greater spontaneity and freedom. Bare attention also brings the mind to a state of rest. An untrained mind is often reactive, clinging to what is pleasant and condemning what is unpleasant, grasping what is liked, pushing away what is disliked, and reacting with greed and hatred. As bare attention is cultivated more and more we learn to experience our

thoughts and feelings, situations and other people, without the tension of attachment or aversion. We begin to have a full and total experience of what it is that is happening, with a restful and balanced mind (Goldstein, 1976, p. 12).

Deane H. Shapiro Jr (1982), in the literary review comparing clinical and physiological effects of meditation with other self-control strategies such as hypnosis, biofeedback, and progressive relaxation reported that most studies: . . . *have found that the constellation of changes is significantly different between meditation groups and placebo control groups but not between meditation and other self-regulation treatments (p. 269).*

In the number of studies Shapiro cited, six showed no significant physiological differences in the measurement of galvanic skin response (sweating), heart rate, or respiration rate. He also cites Fenwick and Associates(1982), who said in their 1977 publication that “subjects who were tense to start with displayed a greater relaxation response to meditation and listening to music than subjects who were not as tense” (p. 269), which may indicate a bottom floor entry level inherent as a variable that so far has not been accounted for in any of these studies.

A 1976 study by Goleman and Schwartz as cited by Shapiro (1982), showed that meditators had an increased responsiveness to an anticipated stressful event while viewing a film as well as a quicker recovery time when compared to a “relaxing control group” (p. 269). Shapiro (1994) in a more recent study notes that early reductionist research studies tried very hard to measure the effects of meditation based within the context of Western scientific psychology and thereby removed the religious context in an attempt to validate the technique. And without negating that strategy of research, after over two decades, the time may now be here to reintroduce what Shapiro (1994) labels a “cultic context” (meaning religious trappings), arguing that “no technique is truly examined context free” (p. 109). He acknowledges also that the use of traditional scientific methodologies and reductionistic strategies is not yet complete and further studies need to be developed to continue to look in that

direction to help us continue to understand the mind/body relationship and to bring “clinical and health related benefits to the individual” (1994, p. 109). Shapiro’s 1982 literature review includes a citation of Jevning and O’Halloran who then proposed that there are physiological response patterns found in meditators that are not reflected in the scientific findings as, . . . *we do not have the physiological measures sensitive enough to ferret out the unique aspects of meditation compared with other self-regulation strategies (Shapiro, 1982, p. 269).*

There are cautions and considerations by some meditation researchers and critics of the therapeutic use of meditation. Shapiro refers to adverse effects and contraindications when meditation is to be used in therapy including the negative effects for someone who is a . . . *self-critical, perfectionistic, Western-goal oriented individual who learns meditation will probably bring that same cognitive orientation to the task of meditation. He or she may, therefore, be highly critical (e.g., I am not doing it right); each thought may be seen as defeat, and an internal fight might ensue to stop “thoughts” (Shapiro, 1980, p. 271).*

Shapiro also describes the experience of another patient who tells him, *I became distracted by thoughts, then worried about being distracted; but I couldn’t stop the flood of thoughts; I started crying; it was almost impossible for me to then return to breathing (Shapiro, 1980, 271).*

This is an important example to illustrate the heed by Urbanowski and Miller (1996), who say that: *The most important feature of combining psychotherapy with meditation is the psychotherapist’s personal experience and understanding of meditation practice . . . these meditation practices need to be an integral part of the therapist’s own personal life so that a genuine understanding of the process of what happens during meditation is well understood (p. 45-46).*

It is too easy to say that boredom, anxiety, restlessness, being distracted and crying are adverse and therefore they are caused by meditation practice. Perhaps, instead, they are conditions that have been previously set up and have been present for a long

period. There has been no awareness of them, and now they are just beginning to be uncovered enough to be noticed through meditation. It is much like a closet in our home that we have stuffed and cluttered with our belongings and into which we continually stuff more things. However as we continue doing it, we are unaware of how full the closet is getting. After all we can close the door to the closet and have all the stuff hidden from view. And then, one day as we go to stuff yet another one thing into the closet, when we open the door everything seems to explode out of the closet and come tumbling down over us to the floor. We get upset and even angry and maybe we begin to cry. Initially, we are most probably upset over the fact that we don't have time for such an interruption in our carefully planned and otherwise full schedule. Of course we miss the point completely as we grow more irritated and even blame these articles that have dared to fall out. We might even go so far as to get angry at the door that we inadvertently opened for not fulfilling its promise to keep things hidden from view, or even curse ourselves for having opened the door at all.

The closet full (mind full) of our unattended things (thoughts) has always been there, and we may have unconsciously chosen to ignore its contents. When the contents erupt out of the closet we may then seek to lay cause and label them as adverse. The adversity does not come from the items in the closet but is created by our relationship to those items and the meaning that we have attached to them. Just so, in our lives we try to cover things up, put them aside, or try to ignore them or even deny they exist. And then one day we do something seemingly innocent, like meditation, and suddenly all of those things flood our conscious mind. We should not jump so easily to once again blame the meditation just as we might not jump so quickly to blame ourselves for opening the closet door. Or, perhaps I should say better, that once we have jumped to our conclusions and have stepped back from the mess and get a better perspective, we might be able to examine it more gently and view it as a part of who we are rather than try to deny any relationship with it. This is the practice of mindfulness in action; when first practice be we may be opening that closet door to all that we have stuffed for a lifetime, and it can appear overwhelming,

and it may not seem possible to return to the awareness of the breath. Perhaps it is not appropriate to even do so at the time.

A therapist who is also a well practiced meditator can be of assistance at this time to help the patient to work with the distracting thoughts that are flooding through, or to remind the perfectionistic, highly critical patient to gently back away from the hard and fast rule that things can be done only one way. This could be a possible time for great healing to occur and to acknowledge rather than deny what is actually happening. It may also have been appropriate for the patient who felt overwhelmed to tears to be encouraged by the therapist to be present to her great feelings of being overwhelmed and if that brings a flood of tears, then cry and so be it. And when another thought or emotion appears more prominently in the foreground of her awareness, the therapist could suggest that she be with that for however long it is in the forefront, and continue practicing this process of bringing her awareness to whatever is foremost over and over again.

The patient was in touch with her own suffering and pain, possibly created by her perfectionism of needing to perform her life the right way. Her judgments were overwhelmingly falling out of the closet. I believe it may have been great fortune for her to have such difficulty returning to the breath awareness. Her rigid structure of having to do the meditation and performing according to the strict manner she thought was the right and therefore only way collapsed and she had no more room in her closet. She was forced to fall apart and cry. The only real problem here may be her relationship to falling apart and crying and her judgment around that. If she had no judgment around crying she could have just cried until she was done crying.

Meditation is an organic process and not linear, nor academic. It is rather, a practice to be experienced fully and completely according to our process. We practice with the intention and understanding that each time we sit down is like the first time and there are no redeeming points and no rank given for how many years we have been practicing. There is no amateur or professional status. What is important is that we do have interaction with an experienced practitioner or teacher and that we bring a

sense of self-compassion to both our practice and our life. The purpose of mindfulness meditation is not to whitewash our thoughts or lives, but to enable us to be able to see those thoughts clearly for what they are and their representation of who we believe ourselves to be and still, not push them away, deny them, or repress them. And yes, in meditation we do not have to dwell in those thoughts, but when a thought or emotion surfaces for us which is experientially painful, and we find ourselves in tears, then that may be what we need to allow ourselves to experience at that moment: feel it entirely as much as we can allow, follow that in the process of awareness to its wane, and then when we first notice, "Ah! I am away from the breath," return our awareness once again to the breath.

Mindfulness meditation is not some robotic procedure that is clinically sterile and that solidly declares that we should never experience another valid emotion in our life. Rather, I believe, that mindfulness meditation allows us to be able to experience any and all emotion, including our own rage, more deeply than ever without finding it necessary for us to act it out physically on ourselves or on others.

There are more and more places both in the United States and internationally that have established clinics on the University of Massachusetts model, offering mindfulness-based stress reduction. As there is growth and greater numbers participating in the practice of mindfulness, there is also a greater opportunity for research to support the use of meditation techniques for the treatment of medical and psychological conditions.

Some of the research literature addresses the psychological effects of meditation, particularly the unveiling of previously repressed memories and emotions (J. J. Miller, 1993; Urbanowski & Miller, 1996; Shapiro, 1982). There is expressed concern about the unveiling or surfacing of traumatic memories and emotions during the progression of meditation practice. This has helped to surface the issue of informed consent by health care professionals who have referred patients to a medical based stress reduction program and who call for any person who is interviewed for a

meditation based program to be informed of the likelihood that psychologically painful material may arise through meditation (Miller, 1993, p .176).

Miller shows three case studies using meditation techniques that demonstrate the potential role of meditation as an adjunct to psychotherapy. Two of the case studies had no prior psychiatric treatment history and one had no conscious memories of her childhood sexual abuse. Miller (1993) cites an article by Grinfeld and Reisman (1993) which reports that “researchers have estimated that as many as 64% of sexual abuse victims have been at least partially amnesic during some point in their lives” (p. 177). Although Miller calls for a screening interview where risks as well as the benefits of meditation can be discussed with the prospective participant, he also acknowledges how meditation based stress reduction can significantly increase the stress level for some individuals. His response to Grinfeld and Reisman’s percentages of sexual abuse victims is that the repressed nature of sexual abuse practically makes it impossible to screen in an interview as “. . . it is during the process of meditation practice that the risk factor for psychological distress surfaces” (Miller, 1993, p. 177). Miller concedes that a large number of meditators will have at least one risk factor for “rising psychological distress” (1993, p. 176) during meditation practice. Among the risk factors he mentions are those persons with a history of psychosis, severe personality disorders, significant recent personal loss, severe depression, history of physical and/or sexual abuse, and active substance abuse.

Meditation practice may indeed serve as the vehicle to allow them to access, re-experience, integrate into their conscious awareness, and heal through past trauma. . . . Some view unveiling as a necessary part of their own personal journey of growth and healing, and may be able to tolerate intensely painful material through continued meditation with no intervention (p. 177).

When such painful material does surface, some meditators elect to stop meditating altogether, others will use psychotherapy as an adjunct to work with the arising material, and a small percentage: . . . *are flooded with the painful psychological*

material that results in severe symptoms of anxiety, depression, anger or psychosis that requires acute psychiatric intervention (Miller, 1993, p. 177).

The unveiling process is a phenomena that also occurs in the course of psychotherapy and while it would be difficult to predict who may be at potential risk, there are methods that a well trained therapist/meditator can utilize to help a patient through an extremely crucial time.

The development of attentional stability is a process that must be carefully constructed for trauma survivors. It is important for the client to establish a sense of being grounded, of being connected with the physical world. Walking meditation is a good beginning concentration to do this, as it develops a sense of being connected with one's body without approaching areas of the body that may trigger trauma flashbacks (particularly in those who have suffered sexual abuse), and it brings a sense of feeling grounded, connected with the earth (Urbanowski and Miller, 1996, p. 33).

It is my professional as well as personal experience that the phenomena of experiencing flashbacks of previously repressed memories of trauma and abuse is also possible when a person decides to engage in a progressive set of bodywork treatments whether it be therapeutic massage, breathwork, rolfing, or numerous other somatic modalities of body therapies. Since our ability to predict the surfacing of repressed memories of trauma is almost impossible, there is a greater responsibility upon all professionals concerned to be aware of such possibilities and to be prepared to deal with them.

The stress reduction program at The Stress Reduction Clinic, University of Massachusetts Medical Center is an eight week course to which patients are referred by their doctors. The course teaches the daily practice of mindfulness meditation and promotes its integration to everyday living. The patients are informed that the eight week course is about being awake to their everyday experiences, and that they may very well experience more stress. The practice of mindfulness is taught using five

main techniques of (a) the body scan, (b) gentle yoga, (c) sitting meditation, (d) walking meditation, and (e) eating meditation. Each of these will be further described in the course of the paper. Patients undergo a one-hour long pre-class interview for evaluation. In the interview, the patient's history is obtained and the program and its requirements are presented to the patient.

As outlined in the Professional Training Resource Manual (1993), to enter the program, the patient commits to (a) weekly attendance at 2.5 hour classes; (b) approximately one hour per day, six days per week minimum of formal or informal meditative practices assigned for home practice each week; and (c) attendance at a 7-hour silent retreat in the sixth week of the course. At the completion of the program, there is another hour long pos-interview with the patient to discuss the course and how it impacted the patient as well as to ask about future goals and intentions (p. 2-3). Each participant receives two audiotapes of four different mindfulness practices to be used for home practice.

In the curriculum, each of the eight classes have a theme which I will lay out as I progress through each week. All factual material is based on the Professional Training Resource Manual (1993). Any descriptive accounts are based purely on my own experience of being present in any one of three or four classes during that week as an intern.

In the first class participants are welcomed and the requirements are reviewed, and then the instructor gives a brief introduction to the program. The theme in this class is that there is more right than wrong with you. It is here that the tone of non-judging is established and the participants hear that the course is an opportunity to work with their problems in a supportive and confidential environment.

At this point, each participant is given the opportunity to introduce his or herself and tell why they are there. This is a very personal and intimate time in the program. Most participants, if not all, reveal things about themselves that they do not ordinarily discuss. They tell of their chronic illness and its affect on their lives. One man said

he was here because his doctor told him he could have a second major heart attack at any time without warning. A young woman had been hospitalized in the past two months with an asthma attack and was afraid she was repeating the history of her mother who had died when she was young. Her fear was that she wouldn't see her children grow up to become adults. They each tell their story. There is always a profound effect to listening to them. The amount of suffering that is related is unfathomable. I have wondered each time how each of these people are going to fare during the duration of the eight weeks of intense practice.

Once everyone has been introduced, we begin the first meditation practice of the program: the raisin-eating exercise. Each participant is mindfully handed a raisin, and is led by the instructor through a process of meditation around the raisin they hold in their hand. This exercise is designed to reconnect them with the idea that all things are connected. They are led through to eating the raisin in a meditative way. Most people say their first thought is that "This is weird!." Many report after eating it mindfully that they never realized how filling one raisin could be.

As the class begins to transfer their pointed attention from the raisin to the breath, the instructor leads the class into a guided body scan. The body scan is a completely focused process of moving the mind through the body and paying attention to whatever is there whether it be sensation such as pain, texture or temperature. The technique is used to re-establish connection with the body and develop concentration skills. The body scan immediately confronts the illness or pain each person is dealing with. Some find it difficult to do. Others say they feel refreshed as if they have slept through the night for the first time in months. Some others fall asleep. The class is given instruction to practice the body scan with the tape for the next week.

Class #2 begins right where #1 ended, with the body scan. Afterwards there is discussion about how the practice for the week was and about any problem they may have encountered finding the time to do it. Most, surprisingly, seem to work it into their busy schedules, although not without the problem of finding a quiet place and time away from the daily family responsibilities. Some begin their day earlier to get

in the practice and some do it when they come home from work. The instructor encourages them by talking about the fact that everyone's mind wanders and that the practice is not concerned about the mind wandering. The practice is that each time they notice that the mind has wandered away, that they bring the mind back to the breath and the part of the body that the instructor on the tape is referring to then.

The theme of today's class is perceptions. How do they see things? What do they think they see? What do they really see? And, what don't they see? Through a series of exercises, the answer to these questions are brought to light for each participant and then they are asked to connect what they see to their pain, illness, and stress in their lives. Their field of awareness is open for expansion as they see there are old ways of reacting to their problems and possible new ways of responding to solving their problems. Home practice is discussed and the class is ended with a short sitting meditation with the guided awareness of attention brought to the breath. Participants are shown the correct body posture for sitting whether they are using a chair or a pillow to sit on. In addition to the same home practice as the previous week of the body scan, they are instructed to add a short sitting meditation each day.

In the third class the practice of gentle yoga is introduced. The participants are led through a series of yoga postures that are held while keeping the awareness of the breath. In practicing these postures, they are again bringing attention to their body, this time through movement and stretching. They are exploring the limits and boundaries that are within their means with careful awareness to honor those limits. The purpose here is not to push past the limits. The purpose here is to get to know their limits. For some it is another way of shining the light on their problems. If they thought they were going to be taught how to forget their pain, anxiety, and the reason they were referred to the clinic in the first place, this is the time those thoughts get erased. Each technique brings them closer to their body and serves to focus even more intently inward. They are shown that there are different ways to view their problem. They begin to see that there is more than one way of approaching their life and the stress that comes with it. Practicing the yoga daily also

begins to build strength and flexibility in their body. They will be practicing the yoga along with the body scan for the next week as home practice.

Class #4 begins with an extended sitting meditation. The students' attention is guided through the sitting to focus on the breath, body sensations, and their body as a whole. The discussion begins around the previous week's practice and any questions or comments anyone may have. Today the instructor introduces the concept of stress and there is discussion around its effects on the body and mind. The influence of meditation is brought into the discussion and the relationship of meditation practice to stress.

The theme this week is around the awareness of being stuck in our life and seeing the places where we get stuck. We are dealing with the shadow, the darkness in our life. We are asked to look at something we are not comfortable about and that raises uncomfortable feelings. This is tied in with the emotional effects of stress and our reactivity to unpleasant feelings. Stressful situations with daily living are brought up and related to regarding responding to stress versus being reactive to it. Their daily practice is providing them with a tool to have the ability to be able to view stressful situations with a more objective approach rather than be thrown into emotional reactivity. They are given instructions for the next week to continue alternating with the body scan and yoga and to increase their sitting meditation time.

With class #5 we are at the halfway point in the program and the instructor asks the participants to reassess their status and if they are willing to recommit to the second half of the program. It's time to see where they are in relationship to where they were when they first came and to look at the remaining weeks as a new beginning. The conversation around responding and reacting to stress is broadened and discussed. Guided sitting meditation gives attention to distinguishing events from content that occur in our thoughts. Stillness is emphasized. For home practice, they are to alternate daily between the sitting meditation tape and the yoga or body scan.

By class #6 the participants are familiar with each other and have found a comfortable spot in the classroom. Home practice is discussed and the details of the upcoming all day session are given by the instructor. The theme today is around stressful communications and how to maintain your center and remain open throughout. The instructor demonstrates through aikido exercises the roles of being passive, passive-aggressive, aggressive, “stuck”, helpless, and assertive, blending, and entering. The importance of centering, taking one’s ground, making contact, acknowledging the other person’s point of view, showing your own point of view, and being able to stay with not knowing the outcome while maintaining mindfulness. This class brings up a lot of volatile feelings. The class is dealing with face to face confrontation in these exercises and they can readily relate to their usual role. There are a lot of questions and discussion. Class finishes with a short sitting meditation. Home practice is to continue the practice as last week.

Continuing to look at different perspectives in class #7, the instructor may ask everyone to choose an unfamiliar place to sit in today’s class. It is a good opportunity to see how easily we get attached to things and to look to see how or where we are attached in our lives. The focus of today’s sitting meditation is choiceless awareness. Attention is given to whatever comes into the forefront of awareness. It could be body sensations, thoughts or sounds. The breath is used as an anchor in case of wandering away from attention.

The class has completed the all day session over the weekend where members of all the stress reduction classes come together in a larger space for the entire day. There is discussion about what it is like to practice for an extended length of time and with a larger group of people. Today’s theme is around the topic of diet and all of what we take into our bodies in the broadest sense of the word. We talk about food, chemicals, relationships with others, addictions, abuse, and depression. Discussion is centered around moving out of self-destructive patterns into more healthy patterns. For the week’s home practice the class is assigned to practice formal sitting meditation on their own and to pay attention to what they put into their body.

For the 8th and last class, we start out as we did in #1, with a body scan, and then go directly into a sitting meditation. The discussion today is around reflecting on the reason they came to this class, what were their expectations, and why they stayed. What did they learn, what sacrifices did they make, and what are the biggest obstacles to growth and healing?

The program is reviewed and the participants are reminded of the discipline they have been developing over the past eight weeks with formal and informal practices of mindfulness. This is the moment of taking it all with them for the rest of their life. They are given a schedule of support graduate programs to attend if they wish. The class, once again as in the first class, goes around and shares, this time what it is they have gotten from participating in the program. They tell of how their perspectives have changed, how their relationships have changed, mostly toward themselves. Some discover things about their bodies for the first time, such as coming to realize all that it carries within. They tell how they have discovered that the very thing that brought them here has provided the blessing in their life, and a way to view other things as well. There are no miracle cures, but what there is for them is a way to be present in their life to all that is both pleasant and unpleasant. That is a freeing experience that encourages them where they once felt hopeless and empowers them where they once felt helpless.

I found that this program provides a context for people with serious and chronic health problems who have nowhere else to turn for help. It's success is well documented with clinical studies and the program is becoming more generally known to the lay person who may not be in acute crisis, but who is interested in prevention and wellness. It gives access to that place of centering or homeostasis and teaches through self-regulation how to downshift from the wild ride of the fight or flight response. What I believe is key to this approach is the integration of body/mind. Although the mind is certainly referred to as the thinking vehicle we all have, the body, corresponding partner to the mind, is used to lasso the constantly jumping and wandering mind back by means of the breath. They are linked and bound together just as two sides of a coin, as night is to day, and death is to birth. We have become

so scattered and disconnected from being present in our bodies that to make that mind/body connection can be terrifying.

The teaching of compassion, and non-judging is something that we need to be taught to remind us of how it may have once been for us. It helps us to remember something of what it feels to reconnect mind and body with awareness and experience and what it feels like to once again experience wholeness. It is no small task, but statistically, studies show that even four years after taking the class, *at least 93% of responders reported practicing one of the three techniques (formal meditation, yoga, awareness of breathing) at some level*" (Kabat-Zinn, Lipworth, Burney, and Sellers, 1987, p. 168).

The next section of this paper presents a phenomenological study of ten graduates of this program. Their descriptions and accounts leave little to the imagination of the depth of their pain and suffering that has been present in their lives. Their accounts also provide a vivid picture of what they experienced through the course of participating in this program. They are genuine, straightforward, and sincere descriptions of human beings experiencing the full spectrum of living

Chapter Five - Research Methodology and Results of Phenomenological Analysis

This chapter describes the phenomenological research method, and how the author applies this method to the phenomenon of her co-researchers' experience of the effect of mindfulness on stress. Discussed here is the appropriateness of the phenomenological research method to the experience of the effects of mindfulness on stress, and an exploration of the possible limitations. The second part of the chapter explains the process of the investigation of the data. Included are the author's personal biases and a display of the data collected. Also included is a description of the steps used to proceed from the raw data to meaningful units.

The purpose of research is to gain knowledge. Traditional research methods of Western science is based on the idea that reality is equated to external, natural objects, and that knowledge is the description of those external objects (Polkinghorne, 1989, p. 41). The thinking that reality is made up of external objects has led scientists to develop quantitative research methods in an attempt to understand these objects as they exist in themselves without the distortion of personal perspective and subjective biases of the researchers. Using this method has been, and continues to be valuable and valid. However, it shows only a partial picture of reality and is limited by reducing the knower to a "passive recipient of reflective sensations from natural objects" (Polkinghorne, 1989).

Phenomenological philosophy, founded by Edmund Husserl (1859-1938), holds that gaining knowledge is an active rather than passive process, and that reality consists of more than the object of inquiry. Additionally, there is the experience of the object which is inseparably linked to the object. Husserl's aim was to understand human experience and defined phenomenology as the rigorous and unbiased study of things as they appear.

It was Drs Adrian van Kaam and Amadeo Giorgi along with the help of other scholars at Duquesne University who pioneered the effort to modify the research methods of

phenomenological research for psychology. Phenomenological psychology places the emphasis on descriptions from research subjects rather than from the researcher's own self report (Polkinghorne, 1989 p. 43).

Psychological researchers use open-ended interviews, and then working from the transcripts, they search out meaning units which are constituents of the experience. Phenomenological psychology acknowledges the reality of a person's meaningful experience to be a valid means to knowledge. Mainstream psychology looks upon human behavior as a mechanically learned response to stimuli, which differs from the outlook of phenomenological psychology, which maintains that human behavior is an expression of meaningful experience. Phenomenological psychology chooses to study phenomena appropriate to psychology that are typical for groups of people. It examines these phenomena in a methodical, systematic and rigorous way.

Phenomenological research is both qualitative and descriptive. Generally, qualitative research means that the human realm is explored and seen closely related to the logic of natural language as the select way to understand human affairs. The term descriptive research, according to Polkinghorne (1989), usually refers to "all those inquiries whose goal is to give neutral, close, and thorough account of the topic they are investigating (p.44). Phenomenology, although sometimes described as both descriptive and qualitative, differs in that its focus is on a person's experienced meaning rather than on the description of their action or behavior. It distinguishes between the phenomena that presents itself to a person's awareness and the reality that exists "outside" of that person's experience.

The author could have chosen qualitative research methods to carry out this study and focused on outside or physical changes which were experienced and corroborated by physical testing and evidence. Instead, the author of this study has chosen phenomenological methodology because it seeks to understand from an inside or inner perspective. This method of research closely aligns with the subject matter being investigated involving mindfulness meditation practice and Jungian individuation. This methodology of phenomenology studies phenomena just as they

present themselves to consciousness whether in tangible form or subjectively felt. It studies the experiences that people have of their bodies instead of studying the body as an organic object, and its purpose is to “produce clear, precise, and systematic descriptions of the meaning that constitutes the activity of consciousness” (Polkinghorne, p. 45, 1989).

Giorgi (1975), also states that, *Phenomenology is the study of the structure, and the variations of the structure, of the consciousness to which any thing, event, or person appears . . . phenomenology wants to exclude nothing that can appear and on the other hand, include only that which in fact appears precisely as it presents itself. The minimum condition for the study of anything is that it be present to someone's consciousness (p. 83-84)*. Therefore, the aim is to focus on the descriptions of the human experience, and the contents that become present to consciousness. The descriptive accounting can include memories, feelings, and perceptions.

According to Max van Manen (1990), phenomenological research is comprised of the following principles and components. First, the study of the lived experience asks, “What is this or that kind of experience like?” It is interested in studying the world as it is actually lived. In this respect, it is not conceptualized but rather it is experienced. Second, the explication of phenomena is accomplished as they present themselves to consciousness and therefore is recollective reflecting on experience that is already passed or lived through. Thirdly, phenomenology is the study of essences or the very nature that makes the phenomenon what it is. Fourth, phenomenology accepts the description of the experiential meanings we live as we live them and attempts to reveal and interpret these meanings in an exploration of depth and richness. Fifth, phenomenological research produces a human scientific study of phenomena by systematically using specially practiced modes of questioning, reflecting and focusing. It is a human science rather than a natural science with the subject matter always the structure of meaning of the lived human world. Sixth, it is the search for what it means to be human and has as its ultimate aim, the fulfillment of our human nature to become more fully who we already are.

Seven, it is a poetizing activity which is “thinking on original experience and is thus speaking in a more primal sense” (p. 13).

For the most part, university texts and courses continue to stress quantitative, standardized practices, which historically have guaranteed validity to studies. Phenomenological psychology is more fluid and subjective than traditional academic psychology. According to Van Manen (1990), *“Subjectivity” means that one needs to be as perceptive, insightful, and discerning as one can be in order to show or disclose the object in its full richness and in its greatest depth. Subjectivity means that we are strong in our orientation to the object of study in a unique and personal way—while avoiding the danger of becoming arbitrary, self-indulgent, or getting captivated and carried away by our unreflected preconceptions (p. 20).*

Validity is a concern of all research. How does the researcher prove that the findings of the research can be trusted? In mainstream research, using accepted mathematical statistical procedures to measure data generated from questionnaires makes it easier to prove validity since in the world of science we hold measurement to mean validity. Modern scientific method is an outcome approach to research that something must be proven. Phenomenology, on the other hand, is not out to prove something. The aim is to accurately disclose the underlying structure of the phenomena that constellates all the invariant elements into a unified experience.

The limitations of the phenomenological method become apparent unless the researcher is rigorous in carrying out the research steps. When wrongly applied by phenomenologists who make generalizations without going through the suggested steps to collect the data and form the analysis, the strength of phenomenology as a valid research tool is greatly diminished and its effectiveness is limited. According to Polkinghorne (1990), *The validity of phenomenological research concerns the question, “Does the general structural description provide an accurate portrait of the common features and structural connections that are manifest in the examples collected?(p. 40)*

The usefulness of phenomenological research lies in its ability to supply a deep and clear understanding of what it is like for someone to undergo an experience. Polkinghorne (1990) states that, *The research results amplify our understanding of these experiences and lead to several consequences: (a) we can appreciate and be more sensitive to those involved in these experiences, a particularly significant consequence for those in the helping professions; (b) some of the understandings derived from logical-mathematical theories and research can be enlarged on, deepened, and, in some cases, corrected; and (c) social action and public policy can be amended so as to be more responsive to the way in which we experience various situations.*(p. 58)

Generally the phenomenological method involves three steps (Giorgi, 1994, Halle, 1989). The researcher gathers descriptions of phenomena from subjects just as they present themselves without explanation or hypothesis. Then the researcher analyzes the descriptions while disengaging or bracketing from assumptions concerning any knowledge about the phenomena and comes to identify common constituents that make the experience what it is. Finally, the researcher produces a research report which describes the invariant characteristics and their relationship to each other so that a reader of the report will come away with a clearer understanding what it is for someone to have that experience.

The one and only question this author chose to ask her co-researchers is: "How has your practice of mindfulness affected your experience of stress?" All co-researchers are graduates of a Mindfulness-Based Stress Reduction class which is modeled after the Stress Reduction and Relaxation Clinic at the University of Massachusetts Medical Center. Five are graduates from the Community Health Center of Meriden, Connecticut.

This author expresses gratitude to Beth Roth R. N. C, the family nurse practitioner in the center who teaches the stress reduction classes, for arranging the interviews with these five people. This is an inner city healthcare center and patients who are members of a Medicaid managed care plan receive the stress reduction program free.

The clinic will bill any other health insurance company. Patients who do not have health insurance or whose insurance does not cover the program, pay a sliding scale fee based on income. Free childcare is provided. Two of the five co-researchers are graduate nursing students interning at the clinic who have taken the 8-week course as a part of their graduate studies at Yale School of Nursing. Three other co-researchers are patients of the center and come from a low income inner city environment. Two of these three patients are on permanent disability. Of the five co-researchers, three are male and two are female.

The second group of five co-researchers are graduates of the Stress Reduction Clinic of El Camino Hospital in Mountain View, California. The author was fortunate to intern at this clinic with the director, Bob Stahl, and is indebted to him for arranging for the author to meet with five graduates of his program. The clinic accepts patients from three local managed care professional groups and a patient may receive up to 50% reimbursement by attending at least six out of eight classes. Other patients must be authorized by their primary care physician to be eligible to attend the program and are required to pay up front the full cost to the clinic. Any reimbursement is solely out of their own efforts with their private insurance carrier.

Of the five people I interviewed from the clinic, one is a graduate student in psychology, two are on temporary disability and two are from a high income upper middle class environment. Three are female and two are male. Of the ten co-researchers, all are Caucasian: one is gay and one is of Puerto Rican descent. Since all but one are Caucasian, this study does not take into consideration racial implications. However, there is a wide economic gap in the group and an even gender distribution. The age range is from the early thirties to late fifties.

Protection of confidentiality is a major concern in doing research that involves human beings. This author submitted a research study proposal to the Norwich University Human Subjects Research Committee and received approval to conduct this study from the Human and Animals in Research Committee.

Potential participants were first personally asked by their stress reduction teacher if they wished to be involved in the study. Those who agreed were contacted by phone for an introduction of the author and the purpose of the study. At this time, they were generally briefed of what to expect in the interview. All ten researchers were informed they could withdraw from the study at any time. All agreed to have the session audiotaped and each signed a consent form prior to the actual interview (see Appendix). Confidentiality has ongoingly been maintained in several ways. The tapes are available only to this author and faculty advisors. Names are only on a master list kept separate from the tapes and transcripts. The tapes and transcripts are numbered only without names used in association with the data reported. The tapes were destroyed after the study was completed. The results will be shared with faculty advisors and with Beth Roth and Bob Stahl.

Having a background working with people in the educational field as well as the health care profession, the author felt at ease carrying out the interviews and that ease appeared to carry over to the co-researchers. They were eager to talk about their experience and they spoke with passion about what they had learned. Their candor and willingness to be so open and vulnerable to the author, a complete stranger, was very touching. Just the act of being present to each person's story provided a profound interchange between us and this author found herself in awe of the tenacity of the human spirit.

After the conclusion of each interview, the participant was informed of a post interview period in which they could contact the author for anything relating to the interview. They each also had access to their stress reduction teacher as well as the medical staff at each clinic.

Five of the interviews were carried out in the Community Health Center in Meriden Connecticut and the remaining five were all completed in each co-researcher's private home. The recorded interviews lasted between 35 minutes and 1 hour. The basic format of the conducted interview was for the author to first meet and reintroduce herself in person to the participant; be assured they were comfortable;

inform them again of what we were there for; have them sign a consent form; and proceed with the interview itself.

The author's method of interviewing is to be as present to the interviewer as possible using the practice of mindfulness as her guide. Mindfulness incorporates acute listening skills and the ability to relate compassionately but objectively. Mindfulness also provides the ability to take in the whole field of the participant with all the senses allowing the interviewer to hold the entire frame of reference while simultaneously being able to have pointed attention to what the participant is saying. The interview was open-ended and disciplined in its focus on the research question. The interview was an inquiry into the description of the experience for the participant according to the phenomenological method of interviewing. In phenomenology, the interview seeks descriptions of the experience itself and does not look for the subject's interpretation or hypothetical explanations.

As mentioned earlier, there are both quantitative and qualitative studies that have been conducted concerning the effects of mindfulness meditation on the physical body (Kabat-Zinn, 1982, 1992, 1993, Kabat-Zinn et al. , 1987, 1988). The qualitative studies that have been directed (Miller, 1993, Shapiro, 1994, Tart, et al. , 1991, Patrik 1994) are particularly focused toward the psychological effects of mindfulness. Patrik (1994), however has this to say about the literature that implies that phenomenology is being researched: *In recent literature on meditation, the terms "phenomenology" and "phenomenological" are sometimes used rather loosely to refer to introspective reports given by experimental subjects about their experiences during meditation. Some psychologists have even developed questionnaires or procedures, characterized as ways of operationalizing phenomenology, so that subjects' introspective reports about meditation experiences can be quantified. There is little, however, in this literature that would qualify as an extended phenomenological description of meditation (p. 37).*

Patrik goes even further to say that "most Western psychological literature investigates the physiological or psychotherapeutic effects of meditation, not the

subjects' own reflexive awareness of their meditation experiences.” This has been this author's own experience, having looked for phenomenological studies in this area of meditation. Patrik continues on to compare mindfulness to Husserlian phenomenology as methods for observing and studying consciousness: *In particular, a step in phenomenology called “the phenomenological reduction” (or “epoche”) resembles meditative procedures of mindfulness by which one becomes aware of the fullness, variety and transiency of experiences in the stream of consciousness. Like mindfulness meditation, the phenomenological reduction is an intentional practice of observing and accepting all experiences, without allowing the usual, everyday attitude of “needing to do something, go somewhere, believe something, etc.” distort or organize what is experienced (p. 38).*

The formal practice of mindfulness is a method in which meditators sustain their meditation for the long-range purpose of uncovering truth and clarifying deeper levels of consciousness. Mindfulness and phenomenology share the basic methodology of just observing the contents and processes of one's own consciousness. The meditator is not called to explain the experience of meditation, but to just observe it and study it in terms of gaining understanding of how the mind works. Phenomenology likewise, is not interested in the explanation of the phenomena, but takes the unbiased observation of an experience into the realm of description and study. Both meditation and phenomenology are methods for studying human consciousness.

A phenomenological approach can also be seen in Jung's use of symbols to explore the psyche. He used the mandala and dreams most extensively as expressions of a person's consciousness. Jung, as well, accepted all experiences without exclusion, looking at the entirety of all the motifs or units as well as seeing them each individually. But in the long run, the challenge is to be able to incorporate them all and see the overall picture just as it presents itself. Robertson, (1987) referring to Jung's Foreward to *The I Ching*, and Jung's understanding of the consequences of western scientific thought, and of how we usually assume that the laws of nature are based on causal events, says: *We strive to eliminate chance and thus eliminate the*

understanding of reality of the moment, and its meaning, which Jung termed "synchronicity", the acausal connection between events. (Robertson, 1987, p. xvi).

Jung's work in depth psychology to bridge the gap between the conscious and the unconscious, the inner and the outer, looks to achieve the inclusion of man in his wholeness and subsequently in union with the world. Jung in the process of individuation found a guiding principle that allows the therapist to follow nature as a guide. The difference being that there is an attention to or a consciousness of the process. He found that those patients who had achieved higher levels of integration in their lives allowed their unconscious to speak to them. They listened with full and serious attention establishing a conscious relationship with their unconscious processes. In Jung's Psychology and Tibetan Buddhism: Western and Eastern Paths To the Heart (1986), Radmilla Moacanin states: *It must be stressed that the principles of Jung's psychology are not applied as a method of medical treatment but rather of self-education. In his psychotherapy Jung aims to bring about in his patients a state of fluidity in which they experience change and growth without being attached to a fixed condition. Jung stresses that the spiritual or religious realm of experience does not refer to any creed, dogma, or metaphysical category but is a fundamental psychic function of tremendous significance (p. 45-46).*

In Jung and Phenomenology (1991), Roger Brook submits that Jung's development of analytical psychology has solid and valuable psychological insights, intuitions, interpretations and understandings that can contribute significantly to the psychological enrichment of existential hermeneutical philosophy. He also concedes that it is existential hermeneutical philosophy that provides to analytical psychology the basis for theoretical foundation, strength, and comprehension of which it sorely needs but which it has had minimal success in establishing. In his own words: *I want to argue more than that Jung's psychology can be reworked phenomenologically, or even merely that Jung and phenomenology are intimately compatible. I want to explore the more daring claim that Jung saw and understood as an existential phenomenologist but that he lacked the tools to express his insights in a phenomenologically rigorous way.(p. 2).*

Jung, has been criticized despite his intuitive brilliance, for his vague and sometimes ambivalent expression that have theoretical inconsistencies, his adherence to the Cartesian mind-body dualism, and his rejection of vulgar materialism and rationalism. Brook shows in Jung and Phenomenology, that Jung was however seriously preoccupied with the pursuit of meaning in his own phenomenological way even though his methodology was far from convincing to the formal philosophical school. As Brook goes on to say: *His success as a phenomenologist owes to his skill as a psychologist and hermeneut, but the necessary philosophical understanding was severely lacking. Thus the heart of the method, the phenomenological reduction, was entered without sufficient rigour or self-criticism. The result is that he sees through rationalist eyes and materialistic prejudices, but not the Cartesian ontology that remains in his thought, even as his vision continually transcends it (p. 50).*

Let it be said that this author can see her own shortcomings in the shade of the former paragraph: *...my constant struggle with the apparent need to reduce all input into something that has measure and my seemingly inability to entirely grasp and carry out the phenomenological methodology with total integrity. However, that combined with my innate ability to see through the small lens as well be present with the spaciousness of the entire spectrum creates a conflict within that is ever present and of which I am always conscious. I have my own way of expressing this interminable conflict that I have learned is an intrinsic part of my whole self. I call it organized chaos, for I can appear totally and rationally organized, and simultaneously be aware that I am in complete chaos. My own process of individuation has been to, and continues to be, present to this seemingly incompatible duality and to view it as the inferior function seeking to integrate consciously. (author's notes)*

Prior to analyzing the data, the author performed what Giorgi refers to as phenomenological reduction in which the author bracketed and disengaged from her own presuppositions and prejudices regarding the phenomena under study. The following biases were bracketed: *(a) that I have found mindfulness meditation to be*

helpful in my own process of individuation, and anticipated that to be true for the co-researchers, (b) that I would provide a clear listening atmosphere to conduct the interviews free of my own presuppositions, and (c) that I would view the material provided by the co-researchers with an attitude of openness clear of personal assumptions. In the case of all of these, I found that for myself, I needed to perform this process of bracketing anew each time I returned to the material. The underlying existence of my own biases were ever present and performing the bracketing each time reminded me of that and helped to keep my perspective as clear as I could be. (author's notes)

The data was analyzed and essentially followed the protocol established by Giorgi (1975, 1994), and involved six interrelated steps. First, the transcribed interviews were read through to get a full sense of the co-researcher's experiences. Second, the texts were read through a second time and denoted into units highlighting each relevant word or phrase. Third, as researcher, the author then restated in her own language the meaning that commanded each unit described by Giorgi as "meaning units". Fourth, the theme of each meaning unit was further coded in terms of the specific topic under study (in this case the relationship between the practice of mindfulness and individuation). Fifth, the themes were tied together with general descriptive statements so that the meaning units were related to each other and to the sense of the whole study. Sixth, the transformed meaning units were synthesized from the various protocols into a final general description.

In step 3, units were divided according to the themes that embraced the larger aspects of the study. Examples of these denoted units are: (a) descriptions of alienation, separation, pain and suffering; (b) a deepened experience of self-awareness; (c) and reconciliation, a transformed reconnection with self and others. Individual constituents of each interviewer's description were then compared and matched as closely as possible. An invariant constituent was found wherever the individual constituents were common to all co-researchers and appropriately labeled. This invariant constituent formed part of the general structure of the relationship between the practice of mindfulness and the individuation process.

All the co-researchers described their experiences of stress and the impact that mindfulness has had in their lives. Each one's description was unique and comprehensive. The analysis revealed fourteen constituents. Twelve of these were experienced by all ten co-researchers and therefore are invariant constituents. Two highly qualify as strongly emergent constituents. One of the emergent constituents was described by nine of the ten co-researchers, and the other was described by eight of the ten co-researchers.

Conspicuous is the suggestion that there is an interwovenness and connection of the constituents, and upon further examination it is also evident that the constituents fall into three main areas of experience. The three areas are: (a) Alienation, (b) Deepening the experience, and (c) Reconciliation. Each of these areas is described and personal accounts of the co-researchers are inserted to provide documentation. The first twelve constituents listed are invariant, the last two being emergent constituents:

Invariant Constituents (1-5) / Alienation

1. the experience of chronic illness or disease
2. the experience of physical and/or emotional pain or discomfort
3. the experience of a loss of a loved one, job, or body part
4. the motivation to seek some change in their life
5. the encountering of assistance

Invariant Constituents (6-9) / Deepening the Experience

6. the assimilation of one's opposite or unsuspected self
7. acquiring compassion and the softening of judgments
8. beginning to feel some ease and mastery
9. new level of self awareness

Invariant Constituents (10-12) / Reconciliation

10. the disappearance or transformation of old values and distinctions
11. the integration of the experience into everyday living
12. new found freedom of expression, relaxed attitude, and sense of non-striving

Emergent Constituents (13-14)

13. seeing something greater than oneself (emergent)
14. a coming back to family, friends, and/or community (emergent)

Each of these will be described, and a variety of individual descriptions will be given to display the unique nature of the experiences of these constituents for the co-researchers. All names used are pseudonyms.

The first five invariant constituents fall into the area of alienation, separation, pain and suffering. Used is the phrase “Something happens in their life” to denote that there has occurred an event or events in the co-researcher’s life that has sent him or her into a completely different direction, into a new and unknown area or place. They are alienated from the life they previously knew. This usually demands that old values and held beliefs of reality be sacrificed or let go. That process, to journey into unknown territory may be a conscious decision, as in the case of two co-researchers. However, it usually is not something that we choose to do and this Something that happens in our life most often comes as a surprise and jolts us out of a comfortable existence that we have so carefully planned for. Eight out of the ten co-researchers have experienced this jolt in their lives, mostly through the unexpected arrival of a major or catastrophic illness or disease.

An even further connection regarding the invariant constituents is between the first three, which have been combined under the heading, “pain and suffering”. All co-researchers, in these first three constituents reported experiences of physical or emotional pain having to do with the loss of a job or loved one, or of the sudden appearance of a major illness or disease.

Allow this author to introduce each co-researcher while giving an accounting of the first constituent, the experience of chronic illness or disease: Barbara, in her thirties, is a graduate student from Yale School of Nursing completing an internship year. Three years ago she “left her political career” in Washington D. C. to “pursue a career

in the nursing field” and is studying to be a family nurse practitioner. She reported having “panic attacks”.

Daryl, late twenties, is also a graduate nursing student from Yale. He is also studying to be a family nurse practitioner. His “undergraduate work was in anthropology”, spent a year traveling, and after that returned to San Francisco and started working as a waiter. Interested in becoming involved with AIDS, he began to work as a massage therapist with hospice clients. Through this experience Daryl decided he “wanted to get involved in health care.” Daryl reports having “ indigestion, insomnia, and rheumatoid arthritis.”

Bob, in his forties, is a patient at an inner city clinic. Legally blind, he is on “permanent disability and has diabetes as well as depression”. He has been married for five years. He previously “lived with his parents, who are now deceased, until he was thirty six”. His wife’s two children have just moved in with them; one a teenage boy.

Jim is also a patient of an inner city clinic and on “permanent disability”. He is in his forties, single, and a naturalized citizen having immigrated from Puerto Rico. Jim reports the “effects of childhood polio and headaches”.

Mary is in her early fifties, has three children, one married and lives with her husband and two sons. She reports being “diabetic and having degenerative spine and hip disease and (being) suicidal”. Mary, at the very beginning of the interview had a “diabetic attack with sweats and shaking”, which lasted for approximately three to four minutes until she could eat a piece of candy to quell the symptoms.

Carol, is a young woman in her thirties who has been on “disability for a year”. She was working in a high paced position as a marketing manager and had routine surgery three years ago for nasal polyps. She reports that there is strong evidence to support that there was the introduction of bone infection through negligence of the surgeon during that surgery, and now “has osteomyelitis”. She has already had four

surgical procedures to have the bone behind both eyes scraped to attempt to remove the bacterial and fungal infection that is eating away at her skull. If unchecked, it could bore through to her brain. She reports “depression” and since the interview “has undergone a fifth surgical procedure”. Prior to the effects of the osteomyelitis, she ran marathons, did a lot of hiking and took bicycle trips with friends. She passionately proclaims, “I took profound care of my health”.

Linda is in her fifties. She has been on “disability for the past six months” from her job in an insurance agency, and is a former teacher. She is married and lives with her husband in an upper middle class area. She has always had “panic attacks”, and has recently had a “mastectomy from breast cancer” and says that she has “been suicidal”.

Hank is Linda’s husband, also in his fifties, reported having “depression”. Three years ago he was diagnosed with “testicular cancer” that had spread to the lymph. He has had one testicle removed” and has undergone chemotherapy. He has since returned to a corporate level job position.

Bill is a graduate psychology student, single, and in his early forties. He leads an active physical life and is a daily jogger. He also takes yoga classes as part of his studies. Bill reports “irritable bowel, arthritis, psoriasis, and anxiety”.

Maria is a married woman in her forties. She “left her job as a chemist to pursue a career as an artist full time”. She reports that as a result of the change, she “gained weight and developed high blood pressure”. She also states she has “arthritic pain”.

All of the co-researchers reported some type of physical and/or emotional pain, discomfort through a major illness, disease, loss of a job, and/or death of a loved one.

The experience of physical and/or emotional pain or discomfort is the second constituent experienced by the co-researchers. Here, Barbara describes her discomfort: “I had actual physical manifestations of stress that are very

uncomfortable . . . like my heart starts beating very hard, I can't concentrate in the way that I was doing earlier . . . so this kind of energy has become more and more a negative kind of energy."

As Daryl says "when there's too much going on, I'll have some sort of stomach problems: indigestion, and definitely some trouble sleeping."

Bob reported "having a hard time . . . I was depressed over a lot of issues . . . the walls were closing in."

Jim expressed that "my idea before was real confused, real bad. I was feeling like nothing . . . like I was the bad one in the group."

Mary has a "lot of pain. I live with a lot of pain . . . I'll be in this kind of pain and all the stress, everyday stress . . . and I would totally whack out . . . where I don't want to live, I don't want to deal with nothing."

Carol has "had tremendous trouble sleeping through, chronic stress, chronic pain." Linda, as she practiced the technique of the body scan during the stress reduction program found herself "crying a lot . . . just tears coming down".

Hank in his description reports on the effect of the stress reduction class: "all the letting go of things and the focusing on the present . . . I really needed that because I didn't know if I had a future . . . I stopped buying books . . . I'm never going to read them . . . I would read today's newspaper."

Bill describes emotions that are beginning to emerge. "I'm starting to experience more sadness . . . and it's always been hard for me to go into sadness and deal with it."

Maria who has been diagnosed with high blood pressure, describes how she experienced stress at a funeral for a friend. "I remember sitting there in the funeral home going into meditation because I was feeling my pressure going up."

The third constituent is the experience of a loss of a loved one, job, or body part. All the researchers experienced something to change their lifestyle that sent them into an entirely unknown experience. The experience can be startling and negative, such as a death of a loved one as in the case of Daryl, Bob, Jim, Mary, Carol, and Bill.

Linda has had surgical removal of a breast and Hank has had surgical removal of a testicle. On the other hand, Barbara and Maria both chose to leave one career to pursue another they felt called to and still reported the stressful effects of doing so. Daryl in the realization that a five year relationship is ending, "I sort of came to a painful realization that you have to cut people out." Bob, Jim, Carol, and Bill have all lost their parents.

Bob says, "then with my parents dying, my life changed a lot." Because he lost the sight of one eye he says, *it was a time of total readjustment . . . not being able to drive anymore. . . to need help with things I would never think of asking anybody for help . . . simple things like at the time just doing the dishes was hard because I couldn't see out of the other eye . . . all this stuff congealed into me being super depressed.*

Jim reports, "my father, my mother die . . . I couldn't see her . . . I had to go there and she was dead already . . . and that really hit me hard . . . it made me feel bad."

Mary, whose memory of her father's death when she was eight years old, is linked with a description of being put into a state institution by her mother afterward.

I was taken out of school, put into a state institution, locked in a room, in the third grade, brought to this place and locked up for six months. I kept saying to myself, "Why am I here?" . . . I would look out these bar windows and I'd see these crazy

people, and here I am only in the third grade . . . I just didn't understand why I was there . . . and this was after my father had just died . . . I couldn't turn to my father because he was dead. Thank God for my uncle. He came to the house to check on us kids to see how we were doing and he asked my sister "Where's your sister?" She told him, "Mommy put her in the institution." He was the only one who got me out of there.

Carol's brother committed suicide five years ago and her mother just recently passed away. *I don't have any family left. My mother, father, brother . . . passed away . . . and so, I've had to use my own internal support . . . so all that's kind of set in motion . . . about dealing with pain and suffering, emotions, and seeing the devastation of my family with all these deaths . . . there had to be another way than the way that I had been doing it . . . denial and anger.*

Bill's father died of cancer and his mother has recently been diagnosed with cancer. *family stuff. . . stress . . . specifically after my father passed away from cancer. Then my mother was diagnosed with cancer." Beginning now to experience arthritis, he says "I think it's a somatic reaction to both my parents getting sick and having some unresolved grief and anger around that.*

Linda and Hank who are husband and wife, both have been diagnosed with cancer; she with breast cancer and Hank with testicular cancer. Linda says *I was extremely depressed. I would go so far as to say that I was suicidal. I did not want to face any of this. I did not want to go through it. I felt it was my choice, and I wanted to die.*

Hank, whose cancer was diagnosed three years before Linda's states, *The doctor started mumbling about cancer and I wasn't ready to hear any of that . . . with the second operation, they had to remove one testicle . . . I was in the hospital once a month for four months getting chemo a week at a time, and I was a basket case the rest of the time . . . very, very vulnerable, depressed.*

Barbara and Maria reported the effects of leaving an old career for a new one that they felt called to. Barbara describes the stress:

I'm new to health care, so I just started this nursing program from something that is completely different . . . so it has just been happening in the last three years . . . I was working in politics, which seemed very logical and unemotional. Emotions were not something that you really wanted to expose in that work . . . the emphasis was clearly on logical reasoning, and coming into nursing and learning how to touch people's bodies and to listen for very subtle . . . using my senses to receive information from other people . . . and being really unable to demand logic and logical reasoning from people . . . When you ask somebody, 'Tell me how this began' . . . a lot of people won't cooperate with exactly what you're asking. They talk about it, but they talk about how they perceive it, and at the beginning I would say, 'Well you're not really starting at the beginning. You're just telling me how you feel.' . . . The more I tried to fit people into this form I had in my head the worse it got and the worse it felt.

Maria reports, When I left my job, and art became my whole life and career, it took a different place in my life and when I'm doing it and I'm in it, it is stressful for me, and it has its problems too. . . . I was redefining myself as an artist, and that was very stressful, plus redefining my whole self. . . . It was difficult.

Both constituents #4, the motivation to seek some change in their life, and #5, the encountering of assistance work in tandem with each other, as in most cases, the co-researchers had cause to seek out a cure or treatment for an illness or disease and in the act of seeking out something that would change what was already there, they also sought help. Help came for all these co-researchers in the form of mindfulness-based stress reduction, which in the text they referred to in the wording; mindfulness, meditation, and stress reduction. Half of the co-researchers, namely Jim, Mary, Bob, Hank, Linda, refer to the help of their doctor who led them to the stress reduction classes. Jim and Mary described being helped by the stress reduction teacher. Barbara and Daryl entered the stress reduction program as a graduate course offered to nursing students at Yale School of Nursing. Bill and Carol remark that they joined the stress reduction program after viewing the Bill Moyers program Healing and the

Mind that featured the Stress Reduction Clinic's program which is carried out at the University of Massachusetts Medical Center. Maria heard about the course through a friend who had previously taken the course. All, with the exception of Barbara and Daryl, sought out or were called to take an action that would change something which was not working for them in their lives through a major illness or onset of a disease, as has already been documented in #1 - the experience of a chronic illness or disease.

The following two accounts are of Barbara and Daryl, who answered the call to change, each in their own way. Barbara's call to make a change in her life came in the classic form of the hero's journey, when she was working at the time in Washington D. C. in politics. She recounts this experience, a very powerful story.

I worked overseas at an American embassy doing economic research. I worked on a program managing grants for other people to go overseas and do research and the most recent job was on a relief and development program in Africa, specifically eastern Africa. I was working for a relief organization when Somalia had terrible famine and war and I was responsible for assisting and providing relief assistance to people living there. Part of that assistance involved sending health care personnel to set up clinics, to do needs assessments of people living in the rural areas and cities, and they were doing acute emergency care for those who had been wounded in fighting, and also rehabilitation care for those who were starving, and trying to set up programs that would improve the health of people over long term including children.

It was interesting, I had all this money to appropriate to these different activities, so I wanted to do it in a very logical manner, wanting to give funding to programs that were going to be the most effective. How are we going to measure effectiveness? How are we going to look at this? On the other hand, there were all these emotions revolving around watching all of this horrible stuff happen and having emotional reactions and having to deal with them in a very logical way. I was doing all of this from the main office in Washington, not really out in the field.

But I saw when people came back they had . . . it was almost like a spiritual reaction . . . and they really knew or had very strong ideas about what they had experienced and what they saw there. I finally went there . . . just . . . just to kind of do an assessment of all of the projects we sponsored, and it was so interesting.

I remember one day, I was in Mogodishu and I was on kind of this balcony and looking out to see all these buildings that had been shot out and bombed out and I saw kids with machine guns walking around.

You know all of this stuff that is really horrifying . . . and then I just noticed all of these beautiful flowers that were just kind of blooming. . . (gasp!) . . . right ther, and these gorgeous little birds that were flying around the flowers, and I remember seeing that and thinking to myself that we sent all this money over here and we brought all this food and we've done all these logical things, and what's really important here is just life. Life is just the point!

It felt like I had taken logic a bit far in my life (gasp! . . . laugh) and I needed to get closer to that life (gasp!) and check that out a little bit more before I felt like I could do anymore of this work. I just couldn't handle anymore, doing budgets and that kind of thing. The life of the people, and what goes on with life is what's important. That's why I wanted to do the health care and the nursing.

As a result Barbara sought out a nursing school that happened to offer a class in Mindfulness-Based Stress Reduction.

Daryl, on the other hand, responded to something that has always called to him but that he had never before explored. He rather came to it by chance, being in the right place at the right time, or as Jung would have it, by synchronicity, *there was something about the course that seemed very innocuous and individualized . . . I don't think there was any craziness in my life or any one particular thing that brought me to meditation, it was more that it was offered and I've always wanted to explore this.*

I call invariant constituents #6-#10, Deepening the Experience. This group of invariants seemed to occur in the co-researchers' descriptions after those described in numbers 1- 5. They represent a process of personal work in progress. There is more turmoil of confronting issues and parts of the co-researchers makeup that they were blind to previously. As if they had been jolted awake, and now they are digging in, so to speak, to discover what is happening. They are exploring and being confronted to look at their lives as they never have before.

All of them, regardless of how they came to it, are being taught and guided by the mindfulness meditation they are practicing through the stress reduction class. They are courageously exploring the boundaries of their pain and suffering and in some cases they are desperately looking for some relief. Every limitation is being challenged. They are practicing as if their lives depend on it and there is no turning back now, for they are deep into this phase. They are also beginning to experience something shifting. Their old judgments toward themselves, their illnesses, and their attitudes of others are softening. They are beginning to get a glimpse of what compassion feels like and a new sense of awareness concerning things they have either forgotten or never knew about themselves.

The reference "one's opposite or unsuspected self", indicates those parts of ourselves that we don't seem to understand fully, or may not even be aware that they exist. It's that thing we do which always seems to get us into trouble with relationships, and which makes us uncomfortable with ourselves, but which we just can't seem to get a handle on to acquire any ease with it. It represents that part of ourselves which we need to reconcile to instead of continually resisting or ignoring, hoping it will go away. Jung referred to it as the shadow or the inferior function of the personality, meaning that it is the least developed function of our personality.

Barbara's description of her process is very clear.

At times I would start to feel stress, I would remember. 'Oh! think about it. What is going on here? What is it you are feeling? You can't read this and you can't

understand what people are saying and you feel funny in your body and you can't focus. How do you feel exactly?' And then, being able to just for a very short time, notice those things, and then repeatedly noticing that at different times, and that there are some similarities between the experiences. And then saying, 'Okay, these similarities are meaningful to me. They're me!' And this is something I do. It's almost as if they're becoming old friends to me. They're becoming as much a part of me as my closest possessions, as my own body. The way my hair goes when I get up in the morning, when I can't fix it, it's just me, it's not something that I think is ideal but it is something that is a part of me. And just by making my reactions familiar to myself reduces my anxiety when I feel that . . . they're a part of me, but at the same time, I can then work with those feelings, and experiment a little bit to see what happens when I tweak it one way or the other.

For Daryl, it was pretty straightforward.

Initially, what it taught me was that I use my time ineffectively and that I spend a lot of time not doing things. And that when I try to set aside time for meditating or just for myself, all of this sort of wasted time was highlighted to me.

Bob is diabetic and needs insulin shots daily. He also has a great amount of fear.

Actually it was the stress reduction that got me through having to poke myself with the needle. I tell you it's quite an experience . . . and so I have to take this medicine with a needle, and I'm scared to death of needles. When I was little and went through my brain operation, I probably got poked four or five times a day for thirty days. So just poking myself with the needle is tough . . . I locked myself in the bathroom so that I'm away from everybody and just sat down and decided to do it and did breathing exercise for maybe five minutes until I felt relaxed and just grabbed my leg and put the needle in and I've been doing it for two years since.

In Jim's experience, he describes his waking up.

Mindfulness teach me that I could just think . . . could live my life straight . . . peaceful, ah without that stress that I had before, without that nervous, headaches, all those things I had before because this kind of problem that I had with me . . . I saw people walking on the street and I would say, I don't understand how they do it, I don't know how they do it, I wish I could do it. Without the help I had from these classes . . . anyplace I go, I'm going to be pissed off. I was walking on the street, and if anybody touched me I would, "Hey!" . . . at the super market whatever, that would bother me, people looking at me. . . I'd say "What the hell." Or if anybody would say anything to me I didn't like . . . I couldn't say excuse me or why . . . try to fix the problem or just find out what's going on . . . before I tried to hurt people. Oh now, yes. Now I can walk around, I could talk to you. Before, I used to just sit down over here and wait for you to talk to me. Now, I could be all day talking to you, because I don't feel embarrassed, I don't feel bad. I feel great! There is something that has waked me up. It is something that has told me, "Listen there's nothing wrong with you." That's why I say this is great, like there was something that put the switch on . . . hey, wake up!

For Mary, having the techniques of the class readily available is like a life preserver and they help her to face her fear of living:

I've gotten better. . . I know I've got the fear I don't want to live like that, but I know that my mind's a lot better with it, dealing with it. That's because I can go to the tapes, I can go to the body scan, and the walk. When I do them tapes, I do feel a lot better, and my mind's not off somewhere else, with the pressures, I can deal with them. I said, I can also deal with my social worker! (she laughs)

Carol describes how she deals with her anger:

The first time I took the class, the feeling that I had was generally just feeling profoundly angry and not having a way to express that, not knowing how to deal with that very well. I just found out that I might have to have another surgery yesterday, and I'm not cracking up. I don't think it's all the mindfulness, but it's in a really core

place with this. I can deal with my feelings, and not have my anger just get really stuck. I'd be so mad . . . I was a really fine athlete. I ran marathons. I took profoundly great care of my health. I was really angry.

Linda recounts her night before surgery:

I tried not to run away from what I was feeling . . . and not hide from what I feeling and work with the edges of it when I couldn't get close enough to it. I think I did a real good job because of the meditation in saying goodbye to my breast the night before, and I was able to be sad about it and cry a lot. I was able to tell people, "God dammit, I miss my breast." But I was able to do it in a way that became almost humorous to me. It was a lot of awareness that I don't think I would have had from not meditating, if I'd only been taking drugs.

Hank, discovers something about himself and describes it:

But I didn't realize until with a fair amount of introspection that what I have to do is make everything peaceful, by twisting reality so that everything's easy, and everybody's okay, and I'm just reeling along. I don't care. I've got my life, you know. I don't want to tell people what to do, I just want everybody to be smiling, flowers to be in bloom, it not rain except on Monday. I never quite knew that. It was such a relief letting all that go.

Bill describes his frustration with the work that seems to actually exacerbate all his symptoms.

The arthritis has gotten much worse in the past year as I've done more of my mindfulness work, and I don't know what that's about. So it is harder, and I feel frustrated about that. So, in a way it helps me, and in a way I can use it to stress out more. MK(myself) Are you saying that you feel that the practice might even be bringing up more of the symptoms that you originally are using it to try to dampen? (Bill) . . . Right. Yeah. In fact, my last class this week, people were sharing that it was

nice that they were waking up and they were being more mindful and how they were evolving as people, and I kinda shared that I'm not sure that it's a great thing. Because my brother, who is not mindful at all, has no somatic symptoms really. And I thought, you know, I'm getting all this awareness and evolving as a person, and it seems to be making matters worse. It does seem to be stirring the pot, and if I knew that I'm going to cross that path and get beyond it, I'd be okay with it, but the way it feels for me is that it's getting worse. When things are getting worse, it's hard to know that they're going to get better, and not knowing if they're going to get better makes it real hard for me to stay with it. I almost feel I'd rather be mindless, and go back to being. . . you know, my brother's just reactive and he doesn't care, he doesn't think about those things.

Maria is wrestling with her old patterns of thought concerning religion:

A lot of things came out. It had to do with examining my relationship to religion and I guess the unknown things in life. Those kinds of things started to reemerge in my thought patterns. . . I came with a very negative connotations about religion, spiritual things, I resisted that. And then I got more open to it. What that means to me in a personal way, I don't know yet. I come to it in a very practical sense and to the idea of doing nothing for nothing's sake, it's a very paradoxical relationship there. There is something you do want, so it has a certain paradox to it. It is a mystery to me.

Constituent #7 is compassion, and the softening of judgments. In the following descriptions by the co-researchers, you can just feel the judgments melting, and their burdens lightening. They are beginning to view themselves less harshly and the effect is carrying over to their relationships with others. Carol, talks of the doctor who she says introduced infection into her skull during nasal surgery. "I can see so many sides of things . . . it makes me so much more human. Like with this doctor. She may never acknowledge what she did. I'm going to have to live with that."

Barbara describes how softening towards herself carries over to how she relates to others:

I can easily become caught up in my own feelings of panic or anxiety, and if I know those feelings as myself and I feel some comfort with that, then I can try to notice a little bit how others are. I don't just see myself. I can notice a little bit of what's going on with other people and I guess it gives me a little bit more of a feeling of control of myself and also responsibility for my own feelings and reactions, and takes away the responsibility that I want to and previously put on other people for the way that I feel, and know that maybe others may be experiencing that experience. So it's helped me to really want to focus a little bit more on what other people are feeling, and to really want to try to give a little bit of slack to other people because I know I'm responsible for a lot of what I feel now and other people don't do things to me to make me feel certain ways.

Her development of compassion is described:

. . . as I experience people who seem very ordinary, who seemed very ordinary, and I see that each person is extremely different and unusual and has things hidden within them . . . (gasp!) well you look in their ears and you find things that look completely different than anything you've ever seen!

Or you hear heartbeats that are so completely unusual . . . and you're looking for unique things that characterize a person, then you start looking at all kinds of things . . . my gosh! . . . everything is very very different and unusual and unique, and then you realize

Well! This logic stuff is just an easy way of categorizing so that we don't have to look at them too hard, and we don't have to ah you know . . . it just helps us to organize our world and maybe organization makes us feel more comfortable so then we can deal with one of them at a time. Well mindfulness to me makes me comfortable.

because I realized that it's okay to appreciate everything that's unique and different and it's not stressful to find that. In fact that's the point.

And so using mindfulness in health care, helps me to look at things to see them the way that they should be seen. It's not that I abandon logic altogether because you need a certain framework, but it helps me to appreciate difference and different attitudes and approaches that people take, different ways that life manifests itself in human bodies and the way different relationships work so that my expectations are less important than what I find. That has helped me a lot.

Linda, with a softening attitude toward her family who she hasn't spoken to in years:

When my husband was diagnosed, I never called and told my family . . . they found out and were quite upset that I never told them. When I was diagnosed, I figured I had to call them and tell them, although I hadn't spoken to anybody in a couple of years.

Bill talks of his relationship to his sister's drinking:

When I'm in my sister's house . . . I love seeing her, and I've found it very stressful to be around her. She drinks too much. I find that when I do the meditation, and when I do the yoga, I'm more centered. I can deal with it better than in the past.

Hank describes an experience where he realizes how much he manipulates his environment

I noticed one time as I walking in this beautiful park and open space, there was a kind of a gamy odor . . . rotten . . . vegetation. It must have been early spring, by a stream. It was kind of rank. . . natural, healthy, but rank. And I realized that I was breathing very, very, shallowly. I was experiencing how beautiful it was, the air was great, the hills had just started to turn green, everything! It was beautiful. I was feeling good. This was a bad input. So I wasn't accepting that input. I wasn't

sensing the smell. I was closing that part out . . . I never would have noticed that before, but I realized as I crossed this little footbridge I didn't want to accept that. I wanted to get a little further up the hill and just think about the views and see across the bay and all the good stuff. And I said, you know that's part of it, and I'm just shutting it out. Very telling, because I realized afterwards how much I do that. And it's so much easier when you don't do that. To be able to say there it is, to be able to say thanks, and not fix.

Mary, whose mother had her institutionalized when she was eight, describes a visit she had with her mother who is now in a nursing home with Alzheimers:

I had to face her. I looked at her and said I didn't know if she would understand what I'm saying or doing, but "I forgive you for whatever you ever did. I'm passing you in the hands of the Lord, because you have to be with him now, and I forgive you for whatever you did". And my sister called me a couple of weeks ago and she told me she went to see our mother. She said, "You'd never believe, she's sitting up and she's eating, and she told me she loved me." I said, "Well, she's in God's hands, and so are you, I put you in God's hands too!"

Constituent # 8, is beginning to feel some ease and mastery, during this middle phase of "deepening the experience", it is apparent when the co-researchers are beginning to practice new parts of themselves they have discovered with some easiness and comfortability.

Barbara describes her ability to make choices:

And it (her meditation practice) doesn't make stress go away, it just makes it familiar, and it makes it something that I know how to work with. then also, because I know what it is, I can also know how to avoid it, and decide whether or not this something I really want to avoid or do I need to face it? And then it gives me confidence and a little bit of courage. I think, "Well, I've worked this through" . . . I

think maybe I can work with things that are uncomfortable for me, and I'm not afraid of them.

Daryl describes some ease and mastery "I sort of get this clarity and I feel more competent and more in control of what's going on. Things become . . . it doesn't seem so bad." Mary, who has recounted violent encounters with her daughter, "We'd go fist to fist, knife to knife." . . . describes a scene when all her grown children, including her daughter gathered at her house to stay overnight for a relative's funeral the next day and her children break out into an argument.

I handled it great! . . . I was in the room playing the tapes when they came in. I knew that was going to be it, and as soon as they saw each other, they started. She started off with one of the brothers (her twin) . . . and they can't stand each other. These two hate each other. "Don't even look at me," she says. And he'll say "Don't look at me." So this time I went right in and said. "I'm telling you right now, This is my house, this is my rules, if you don't like my rules, there's the door." They both looked at me. I said. "I don't want to hear no name calling while this funeral is going on. I don't want to hear nothing. You have to get along or get out." They said, "You never did that before!"

Carol relates how she has changed the way she relates to her doctor:

I found doctors I really trust, but I haven't gotten to the place where I have let go about my feelings because I'm so affected. But I'm more aware that I'm affected, I'm more able to deal with it. I'm much more direct with my doctor about the things that can happen to me, whereas before, I just trusted this person because they were a doctor. I'm not going to do that again.

Linda who has a history of panic attacks involving anything to do with doctors or hospitals, needed to have a full milligram of Zanex just to get into the hospital for her mastectomy. She describes her experience of a second surgical procedure after her mastectomy:

I never took any medication and I never had a panic attack before the surgery . . . I wasn't thinking what I was going to be like when I woke up in the recovery room. I was thinking about being in the pre-op area and meeting the anesthesiologist. I was thinking about my doctor coming in and I wasn't thinking about ten years ago when I was operated on. I just concentrated on what was happening at that point and there wasn't anything bad happening.

Maria, who developed high blood pressure, describes a visit to her doctor:

Two months ago, I went to my internist and he said the medication's working great. I said how about if we try to get off, my pressure's been dropping. So I was off for three weeks, and sure enough, it was normal. My pressure's not gone up since. What's happened to me is . . . I discovered through the classes, how I react to things. The way I describe it is Knee-jerk reaction. I learned not to do that, and when I get into deep water, I call on these skills and stop.

Constituent # 9 is a new level of awareness. All the co-researchers discovered things about themselves they had never before known, and received insights into their own possibilities as a person. This brought new-found understanding and a sense of power.

In Barbara's case, she uses the meditation to relate to her body in a way that she then carries over into her life:

Sometimes I have pain when I sit, pain in my knees, and so I play with that a little bit . . . I'm using my breath and I try to say okay, now I'm going to become the pain, and what's going to happen? And I'm going to become the pain by breathing into the pain. . . . and I just kind of notice what happens to the pain when I breath into the pain. And then I try something different, I say, "Oh gosh, I don't know if I can do this anymore, the pain is about to take over." . . . and then if I let the pain take over, let's see what happens then, and I try that and see and just notice what happens. So, my meditation practice is a way of just practicing using my mind and it's relationship to

my body, to move this way way and move that way, and see how each movement works for me, and it's a way of practicing, so when I get up against the real thing, I can try out these different forms or sequences to see how it works with me.

Bill, who is physically active with exercise and running, reports a new awareness of his body:

Part of it has to do with mindfulness. I've always been someone who worked out a lot, and then I realized, I've also been someone who is not in my body. I work out tons and I'm not there. Which is an interesting contrast. And so, over the last year, I've been getting more into my body, more comfortable with my body. . . . So I am becoming more mindful of my physical body. Funny, at the same time, I'm exercising less, and as I'm becoming more mindful of my body, I'm treating it a little better. I don't think that exercise, the way that I did it was kind to my body.

Hank reports:

. . . what I discovered of myself was a whole lot of new things, like I recognize the degree that I was manipulating and controlling my environment.

Carol describing the effects of meditation says:

It has helped me to take one day at a time, and also help me to be aware of how I'm feeling, to rest when I need to rest, honor my feelings . . . and not in a selfish, self absorbed way. So often I can get caught up in obligations . . . to the extent that it's damaging . . . I think it's made me more human. I can deal with my own frailties and vulnerabilities that I used to get mad at or deny.

Jim is passionate as he speaks of his new awareness.

Now I know my body. Before, I didn't know my body. Really I didn't care about my body before. I didn't . . . for anything except pain. Now I know that I'm complete.

Constituents #10-12 contain the theme of Integration. They are #10, The disappearance or transformation of old values and distinctions, #11, The integration of the experience into everyday living, and #12, New found freedom of expression, relaxed attitude, and sense of non-striving. These three constituents are found in the descriptions of the co-researchers as they relate the changes that have emerged into their lives almost magically. They are experiencing freedom in their life, even with the chronic illness. The panic attacks are inexplicably gone as in the case of Linda. The co-researchers describe their inner character and outer appearance as being changed markedly.

They describe in this section the ways they are blending and combining those parts of themselves to form a whole, coherent self that contains a great deal of self-knowledge. It resembles the act of reconciliation with oneself in which one's attitude toward oneself has been adjusted, and corrected. The work they have done in stage two of deepening the experience has brought forth a degree of resolve with those elements of the psyche which were part of the inferior function. Where once they were alienated from themselves, they have now reestablished a close connection. They are more relaxed and able to integrate their lives into the world about them with a great deal less stress than they previously experienced. They have a much broader sense and knowledge of what their stressors are and how to handle the stress with a greater degree of success.

In Hank's case, he describes how he is able to integrate his mindfulness practice into his job:

I just find myself wired and what I need is to settle in and walk into my office and shut the lights out . . . take a half hour at lunch time, just close the door to my office and just pretend I'm not there . . . get recharged. And I like it. I do the informal practice a lot. . . it's part of my life now. It changed my life very much.

Carol, who still has to deal with osteomyelitis and the prospect of not knowing what that might mean to her life in the future:

But I can live with discomfort a lot more. I can live with the uncertainty, the unknown, whereas, before I might have been driven to do something, even if it didn't change anything, but gave me that illusion. Now I can say, "This is really uncomfortable." I used to think "What am I if I'm sick?" And today I'm still the same person. I used to say "I'm a blob under a blanket." It was scary, I thought, "My God! I'm going to be stupid, I'd better watch PBS today so I can know something." Now I just do it if I want to. I'm a real human being who misses being able to do the things that I love but who has been able to make the best with what I have. I think it's such a personal journey of what you put in and what you take out of it.

Bob describes his new found freedom: *"I've slowed down a lot . . . things no longer have to be done right away anymore . . . it can wait . . . it doesn't matter if I'm two minutes late anymore. I'm calmer and can relate with people a lot better."*

Maria describes how the meditation practice is expanding her scientific understanding of life and how she is beginning to see something that before was unthinkable:

There is something very spiritual about just trusting in this higher intelligence, this higher mystery. It's opened the door, which I resisted. I started to read about psychology and I've gotten more into the physical things. What it did was that it finally made me acknowledge, "Yes, there is a mystery in life." And, you can't solve this with science . . . I was open to it before, but I had it in a compartment. I also had an idea that I came about of what the world was made of and how it worked, and I attributed the entire thing to chance and happenstance. Very Darwinian. In fact, I don't know what it means at this point, and I'm reexamining all of this. What I've become more open to now is the fact that I believe . . . I think I understand now a lot less than what I understood before. (laugh)

Bill describes how he is weaving his practice of mindfulness into his life and how it has become:

non-striving . . . part of the work is also spiritual practice for me . . . the more I do it the more spiritual it becomes . . . I'm weaving it into my life . . . as a spiritual practice, and it's going to continue . . . it's getting more spiritual for me . . . in a way I'm becoming more non-striving about it. I originally started doing it to relax and deal with somatic things and now it's become more of just doing the sitting. Sit to sit. Not sit to do something else. I was raised Jewish . . . not very religious, and my father was very anti-religion. So I really emerged from my house without a spiritual path, and to me the mindfulness . . . the way I am in the world . . . it seems like the mindfulness is a much better . . . more suited spiritual path for me. I am now looking to do a longer retreat, maybe a weeklong. And continue it as part of my life.

Linda who was working 40 hour a week job in an insurance agency before she was diagnosed with breast cancer, describes the crossroads she is at and what she sees ahead for herself as the future. She has rediscovered old skills working with the director of the stress reduction team:

What I do . . . at the Stress Reduction Clinic, I find extremely rewarding. I find that the kind of thing that I do with the people who are the potential participants in the program is very valuable. I think that I touch a lot of people's lives. More like I did when I was a teacher, and before I was a teacher I was a pediatric social worker, and that's who I am. I talk to people. I deal with people. I try to help people, and I feel like I'm doing some good. I'm touching people's lives and I'm helping, so my direction is more to stay with working with Bob and hopefully be able to get a part time job at El Camino in community health. I don't want to go back to working a 40 hour week. I want to work because I want to have something to do. I want to be involved with people. I may want to do some volunteer work with breast cancer patients. I found that when I was going through my diagnosis, the worst part of it was the out of control feeling and that fact that things were happening to you and people were sending you places and telling you what to do and you're like spinning. You didn't

know what was going to happen next, and I feel that I can help people with that kind of thing.

Mary illustrates the disappearance of an old distinction she had concerning being placed in an institution, and in describing a relaxed attitude, says that she has acquired a:

. . . sense of thinking before I jump into the fire . . . which mellows me out a lot, temperwise, physical, and mentalwise. I cry when I talk about things, but I'm not off the walls. It really has put a meaning into everything that has happened to me . . . a big meaning. I still don't understand why I was put in an institution, but I understand it's over, done with, and I have to go on with my life. Before I didn't even want to.

Jim's relationship to women has been transformed as he sees women now as something other than a sex object. Here he describes his experience and how that has carried over to change his relationship with his sisters:

Before, I couldn't have a girl friend. I could have one girl, just because I needed to be with a girl. Now I talk to a lady, I could make a date with a lady. I could understand or just know each other, and I don't have the same thinking that I had before, because for me being with a lady was for only one thing. Before, not because I want to know that lady, or because I wanted to make friends. Sex. That's it. That's the only thing I care about before. Having a baby, a woman, just sex, that's it. Now I make friends. I talk to a lady, I don't have to be thinking about sex all the time, just because I'm talking to a lady. I can make friends. Just to know that person. I'm not thinking one way only . . . now I have something to say and I know how to say that. For me, I used to make the women feel bad . . . before I used to treat her like to use, let go, and throw away. I used to hurt before. Now I learned real good that it's not like that. Now I can see a woman like a friend, like a person, like a human being somebody like me but a different sex.

My sisters were only my sisters. It was never a real close relationship, because I was the boy and they was the girls, and whatever I want I could get it, so it was not that really good with my sisters. I was proud of my 5 sisters, you know . . . lady clothes all around . . . ladies all the time . . . since I was little whenever I would look in my house it was full of girls. Now, I could say that . . . oh my God!

Now it's wonderful. Because now, I know how much I love my sisters. This summer I went to Puerto Rico. One day, I sat with my sister at the grave where my father is, my mother, and I have four years I haven't talked with my sister, and the feeling was wonderful. For me, she was my mother, my sister, my girlfriend (laugh). So something big for me. I love her. I had that feeling of being good.

Now I could say that I am a person. I am a human being. Now I know that I got feelings. Now I know that I understand that I got problems. Now I know that I could do whatever I want. Now I know that I could control myself. Now I know that I could help people. Now, I know that I got something over here that I can use much better. That something is my brain. Now I know that I gotta take care of myself, and listen to myself, and know myself, before I could talk about anybody else.

Jim describes how he also integrates mindfulness into his life as something he does everyday:

I do it right here, I'm practicing. Because I'm talking to you, I breathing, I'm relaxing, know what I'm saying, what I'm thinking. If I'm thinking something else, I gotta let it go because I gotta be here with you. Nothing like this happened to me before. Now I love myself, and I want to keep going like that.

Daryl describes the freedom and relaxed attitude he has even when the situation can be stressful:

For me it's a simple matter of being able to put things into a bigger picture. . . the stress is always going to be there and its all how you handle it . . . like this morning I

spent time getting ready to come to clinic, preparing my lunch, having to pick up my friend, getting the notes I needed today . . . if I had to stop and think about it, it would stress me out and get me agitated and what I try to do is to enjoy it in a way. And I think that sounds kind of hokey but I enjoy it in the way of thinking about how good my lunch is going to be, or how nice I would be to my friend when I pick her up to bring her here. Putting that whole experience into that light and I think putting myself into the whole equation of . . . Who is doing this? Ultimately I would like to think about that all the time, but it's something I'll probably think about tonight when I meditate. I'll use that to start off with and ideally I like to do that while I'm in a stressful situation. What happens in a stressful situation is that I'll look back at it and try to savor that. That's sort of how I've been dealing with stress through mindful meditation. That's a very small example of stress, but it's there all the time; deadlines, things we have to do.

Constituent #14, Seeing something greater than oneself, and #15, Coming back to family, friends, and/or community were not invariant but could be considered to be emergent. A total of eight co-researchers described an experience that of "seeing something greater than oneself". This includes the mention of God, spiritual experiences, and spiritual connections to mindfulness, a life attitude, prayer, and mystery. Most of the experiences are mingled with invariant constituents that have already been displayed, such as Maria's opening to something she refers to as "the mystery". Mary, in her description of forgiveness toward her mother, acknowledges her trust in God. Later, she refers to something greater as "big meaning" in her life which, although she may not comprehend it, knows that she can still go on living.

Bob uses the late evening time when he can be alone with everyone asleep to formally practice the body scan or breathing exercise. He calls this time a "very personal thing, not to be invaded" and correlates it to "kinda like religion . . . close to prayer." Carol, describes her formal practice of mindfulness "as a gift to undertake . . . I don't torture myself for not doing it very well or not the right way . . . it's the same kind of attitude that I've taken to the rest of my life."

Something greater can be seen in Daryl's attitude that his illness is "there for a reason to sort of give me more insight into other peoples illness . . . I guess its another aspect of how meditation has helped me in the sense of putting it into a different perspective and looking at healing and not curing."

Jim describes an experience of such deep relaxation in class where his body:

. . . went so far away, that I went to a point where everything was white, clear. . . I was there . . . I know was there, but I didn't hear nothing, know nothing, feel nothing . . . just that I know I was there . . . my body was so nice, that I thought that I was floating . . . I thought I could go up, down, do whatever I want with my body . . . and so peaceful . . . so nice . . . something good . . . oh yeah!

Eight co-researchers mentioned in their descriptions some reconnection to family or friends and those descriptions have been included with various invariant constituents already cited. Linda mentions how she now works with people who are interested in the stress reduction work and wanting to do some volunteer work with women who have been diagnosed with breast cancer.

Barbara describes the classic experience of coming back home after working in other countries and traveling:

I want to be a family nurse practitioner. I'm torn because I really love to travel and love to be in other countries, but it's made me come back home and look at people here in a different way and to see that people here are just as fascinating and exotic as anywhere in the world. There are kids who are kind of waiting for the plane to come in (gasp) with their food. There are people who are living right here who are having the same experiences . . . there's things that need to be done here and so now I'm thinking maybe I need to work here and see what I can do here because this is where I'm from . . . and looking at myself and where do I belong in the community of people . . . and where can I do the most good, and feel the most fulfilled I guess, is what it comes down to.

This author has presented the data of the co-researchers in keeping with the phenomenological method, and has tied the meaning units together into a consistent and systematic general description of the psychological structure of the experience of the effect of mindfulness on stress. The reader may decide, for him or herself, whether or not this presentation is verifiable, and therefore, whether or not it does describe a psychological process that is contained in the original expression given by the co-researchers as the discussion of the results continues to in the next chapter.

Chapter Six - Discussion of Results

In this chapter, the author will discuss the constituents, which emerged through the descriptions of the co-researchers experiences and explore the data for a correlation to the practice of mindfulness and the process of individuation. The study extracted twelve major constituents related to the experience of the effect of the practice of mindfulness on stress. Twelve constituents were experienced by all ten co-researchers, and are therefore invariant to the experience. The author will carry forth the discussion by using three categories, which further organize the twelve constituents. The three categories of the twelve invariant constituents are: alienation from the present life experience; deepening the experience; and reconciliation.

Working with the protocol of phenomenological research, and reading the ten transcripts, it became obvious to this author, that there was a overall, yet specific process which was being described . The process always had a beginning and a reference to the pain and suffering in the participants' life before taking the mindfulness meditation class in stress reduction. As mentioned, all co-researchers have experienced a great loss of one kind or another. This loss or separation, even though it be the loss of another, can be perceived as a loss of the self. It can set the scene for a person to begin the hero's journey in the search of that lost self.

In *Wisdom of the Heart* (1990), Karen Signell writes:

You can also suddenly become aware of the Self by its apparent absence—in your wilderness of indecision before you know what must be done at times of upheaval, in the unendurable loss of the person who holds the Self for you—your mother, grandmother, child, mate, minister—until the Self comes home to you again and you recover your centeredness and buoyancy. You can feel as if you've lost the Self when you lose your homeland, lose your way of finding meaning in life, or lose your sense of belonging in the world, as if your wholeness and continuity as a person has disappeared into a 'black hole' of depression and utter hopelessness (p. 51-55).

Many of the co-researchers experienced depression and some such hopelessness that they reported being suicidal. The overall process then moved on to descriptions of how the meditation helped them to look at and make a closer approach to things that they were not able to before. In this second stage, their descriptions shifted from something happening to them coming from an external source, toward looking at their reactions to the events in their life as a part of their own makeup. This is the stage, which through meditation, they began to sort through and to distinguish parts of themselves that they had not been conscious of before. This was a sorting and identification stage, a place where, although there was guidance and help available, each was alone to do the actual work which included a journey into the unknown.

Jung (1981) says:

. . . an advance always begins with individuation, that is to say with the individual conscious of his isolation, cutting a new path through hitherto untrodden territory. To do this he must first return to the fundamental facts of his own being, irrespective of all authority and tradition, and allow himself to become conscious of his distinctiveness (p. 59, par. 111).

The third stage descriptions reveal the co-researchers' ability to integrate their new self discovery into their everyday life and the disappearance of old values and distinctions they had once based their life on. They described having a new freedom of expression and being more relaxed in their life accepting it as it is, instead of what they prefer it to be.

In the first stage, all of the co-researchers provided descriptions of experiencing pain and suffering, each with their own unique circumstances of illness, disease, a loss of someone dear, or the loss of a part of themselves, as in the case of husband and wife, Hank and Linda; she losing a breast and he a testicle. It is important here to distinguish pain from suffering as this author views it. Pain may be an actual felt unpleasant experience as the consequence of an injury or illness such as a pain in the leg, back, or knee. Suffering, on the other hand is the meaning that we add to the

pain or the unpleasant experience. Jung would call this *prima materia*, the raw material of the unconscious surfacing for us to integrate as part of the whole individual. This meaning that we add comes from past painful repressed experiences that we are reminded of whenever something painful comes up in the present. Subsequently, all the past experiences get piled onto the present experience and we have suffering on top of pain.

So the scenario of pain could look like “I have cancer, I’m scared, and I don’t know if I can face it. But I need to talk about it. *The scenario of suffering would look like, “I have cancer and I’m going to die. My husband left me ten years ago and my children never come to see me and I just don’t know what I’m going to do. I’m all alone just like the time when. . .”*

Suffering disconnects the body from the felt experience and therefore the person is alienated from their own self. There is a separation, and where the separation occurs there is an unknown element, which can create fear. Fear of the unknown is what can separate us from the knowledge of ourselves and can send us into the throes of suffering. Fear of anything surfaces from its roots in the unconscious and into our conscious mind.

Looking at it from a Jungian perspective, we could say that the fear is surfacing from the unconscious realm as a complex, to be available for our exploration with a helper or analyst, ultimately for the integration into consciousness. This is individuation at work, “the transformation process that loosens the attachment to the unconscious” (Jung, 1990, p. 288, par. 523).

Mindfulness in formal meditation treats fear as something to address in two ways: first to physically handle it by adjusting our body position and checking to see that clothing isn’t too tight or restrictive, or in the case of a headache or illness to take whatever medical remedy that is appropriate; secondly, if step one fails, then the pain is made the object of the meditation.

Gunaratana (1991) describes the meditative approach:

Just observe the pain mindfully. When the pain becomes demanding, you will find it pulling your attention off the breath. Don't fight back. Just let your attention slide easily over onto the simple sensation. Go into the pain fully. Explore the feeling. Get beyond your avoiding reaction and go into the pure sensations that lie below that. You will discover that there are two things present. The first is the simple sensation—pain itself. Second is your resistance to that sensation. Resistance is partly mental and partly physical. The physical part consists of tensing the muscles in and around the painful area. Relax those muscles. Just as you are tensing physically, you are also tensing psychologically. You are clamping down mentally on the sensation of pain, trying to screen it off from consciousness. Relax the mind in the same way that you relax the body. In any case, just let go completely till your awareness slows down past the barrier of resistance and relaxes into the pure flowing sensation beneath. The resistance was a barrier which you yourself erected. It was a gap, a sense of distance between self and others. It was a borderline between "me" and "the pain." Dissolve that barrier, and separation vanishes. You slow down into that sea of surging sensation and you merge with the pain, You become the pain. You watch its ebb and flow and something surprising happens. It no longer hurts. Suffering is gone. Only the pain remains, an experience, nothing more. The "me" who was being hurt has gone. The result is freedom from pain (p. 111-112).

The co-researchers describe this release from their fears through the practice of mindfulness. Linda and Barbara overcame their panic attacks. Bob discovers the ability to administer his own insulin shots. Mary discovers that she is able to endure the pain she lives with and through this discovery finds the will to live.

Gunaratana (1991) also describes fear as a common phenomena:

You may be experiencing the effect of something repressed long ago. Remember, thoughts arise first in the unconscious. The emotional contents of a thought complex often leak through into your conscious awareness long before the thought itself

surfaces. If you sit through the fear, the memory itself may bubble up to a point where you can endure it, Or you may be dealing directly with that fear which we all fear: "fear of the unknown." At some point in your meditation career you will be struck by the seriousness of what you are actually doing. You are tearing down the wall of illusion you have always used to explain life to yourself and to shield yourself from the intense flame of reality. You are about to meet the ultimate truth face to face. That is scary. But it has to be dealt with eventually. . . . Observe the fear exactly as it is. Don't cling to it. Just watch it rising and growing. Study its effect. See how it makes you feel and how it affects your body. When you find yourself in the grip of horror fantasies, simply observe those mindfully. Watch the picture as pictures. See memories as memories. Observe the emotional reactions that come along and know them for what they are. Treat the whole dynamic as if you were an interested bystander. Most important, don't fight the situation. Don't try to repress the memories or the feelings or the fantasies. Just step out of the way and let the whole mess bubble up and flow past. It can't hurt you (p. 118).

Thus, this author believes that when we let fear run its course in the arena of conscious attention, it won't sink back into the unconscious. It won't come back to haunt us later. It will be gone for good. Whereas Jung suggested that we use an analyst as a guide to help unlock the unconscious, Gunaratana similarly describes the process of the meditation as a process of looking at the constructs of our mind as they "bubble up" from the unconscious. As he provides instruction, Gunaratana exemplifies the role of the meditation teacher as a helper and guide. He suggests that we give fear our conscious attention, and in doing so our fear will not slip back into that dark region of the unconscious. It will be illuminated for us to see it for what it is and in doing that, we create a familiarity with a part of ourselves that we have spent a lot of energy repressing.

The co-researchers describe their fears of the unknown. Carol has no idea what her life is going to be like. Certainly, it is not going to be like what she had planned it to be. Life is life; it's all the same whether we choose it or not, only our experience of it is different. Some of us are sent out of our familiar world through the occurrence of

outside events like illness. The experience is like being jolted from our comfortable bed by a fire in the night. And other times we choose to make the separation from our present life. Barbara and Maria have and described how stressful choosing a new career can be. Our experience of suffering results from our resistance to the new or unfamiliar and likewise, our desire to cling to the old and intimate.

In Gunaratana's instruction on pain previously quoted, he demonstrates the aspect of What is happening in the second phase of Deepening the Experience. This phase can also be referred to as work. The co-researchers are exerting themselves physically, mentally, and emotionally, digging into their experiences and looking at them with less judgments and more objective eyes. This is something they have to learn how to do. It doesn't happen by just saying so. They are practicing every day to learn the technique of mindfulness with the discipline that athletes train for competition. They look at all that enters their field of experience with a completely new set of criteria and skills. They are practicing staying with their pain and emotional suffering, whereas before, as they report, they were denying it. Jon Kabat-Zinn (1990), gives a sense of this stage in his book Full Catastrophe Living as he describes the process that patients of the Stress Clinic undertook:

. . . each person took up the challenge we extended to them to live life as if each moment was important, as if each moment counted and could be worked with even if it was a moment of pain, sadness, despair, or fear. This "work" involves above all the regular, disciplined practice of moment-to-moment awareness or mindfulness, the complete "owning" of each moment of your experience, good, bad, or ugly. This is the essence of full catastrophe living (p. 11).

This is work, work which is not undertaken by one who lacks courage. In the Theravedan tradition there is a saying that has helped this author enormously. It says, "To Slay The Dragon, Name It". One has to become warrior-like to confront the very thing that produces intense emotions of fear within, and face the very thing we are repulsed by. It is like a wrestling match, where to be in the match you have to come into contact and physically engage with your opponent. We are trying to get to

know our opponent, and discover how that opponent or antagonist operates. It isn't something that we can demand our shadow or opponent to knowingly reveal to us. By our willingness to stay on the mat, to continue to engage, and be present to what our opponent reveals in its own time, we learn patience, and self-compassion. We also learn something about our inferior function, which now becomes something less frightening to encounter. We have already gone through those rounds on the mat with the opponent and it is no longer so mythical or frightening in stature. It is real, and like it or not, it is a part of us we can choose or choose not to claim as our own, for in reality, we are our own antagonist. In Jungian thought the opponent is our shadow or inferior function contained in the unconscious. The battle is with the rational, conscious part of the psyche that contains the ego. Jung (1990), talks of the conflict that is happening in this stage:

. . . if we know anything of the unconscious, we know it cannot be swallowed. We also know that it is dangerous to suppress it, because the unconscious is life and this life turns against us if suppressed, as happens in neurosis.

Consciousness should defend its reason and protect itself, and the chaotic life of the unconscious should be given the chance of having its way too - as much of it as we can stand. This means open conflict and open collaboration at once. That, evidently, is the way human life should be. It is the old game of hammer and anvil: between them the patient iron is forged into an indestructible whole, an "individual" (p. 288, par. 521-522).

During the third phase, the descriptions of the last three invariant constituents demonstrate co-researchers who have stripped away old values and ways of seeing things. They are still experiencing stress in their lives. As Hank says, "Shit still happens." But the way they now view the stress is very different from the way they used to. They are working the tools of mindfulness everyday, and even every moment. They are becoming so adept now that some of the mindfulness is automatically infused into their life and is as accessible as their next breath. They are more relaxed about anything that comes their way. They have practiced and continue

to practice. Some of them have taken on their own formal daily practice of sitting meditation. Several continue to use the tapes of the body scan, yoga, and guided meditation. Most use the breath in an informal practice wherever they are. They are pleased with themselves and with the results. They can see the direct consequences of the work they have done and it is common for others to tell them of the changes they can see. They have been reconciled with themselves.

Reconciliation is to accept or come to terms with what is already here. It is not to be confused with resignation to what is happening and therefore having no choice in the matter. To reach this stage, the individual has actively participated to bring the unconscious toward consciousness. Here is the reward of the work they have done. It is a gift of knowing more fully who they are. They have emerged from exploring the darkness and are renewed. The gift they returned with provides the means for them to willingly relax into whatever may happen. The returned hero has the capacity to freely pass between the reality of the world that is generally known and the one they have just returned from and understand that each is related to the other.

All co-researchers included a sense of there being something greater than themselves in their accounts. Mary outrightly acknowledges God. Maria recognizes the "mystery" of life. Bob says that his own personal time to do his practice is like the time to set aside for personal prayer. Bill takes the practice of mindfulness on toward a spiritual path. Likewise, all of the researchers have made mention of how this process includes their bodies, whether it be how the pain feels, what the use of the breath does to affect their anxiety, or in the case of Bill, how the breath helps him to realize that he, a self-considered athlete, previous to his practice of mindfulness, was not living in his body. They are all dealing with life (spirit) in the container of the body, which also houses the mind. By examining the process of how their mind works, and engaging the body in that examination through the breath and gentle yoga, they are engaging in the healing process of body/mind/spirit.

Chapter Seven - Conclusions and Implications

This chapter summarizes what this author and researcher has learned by conducting this study and brings to culmination the original questions: “Is there stress in the process of individuation? If so, where is it? Is it a necessary function of the process? How does stress fit into our personal and collective mythology? Is the process of individuation beneficial to us? “

Evidence of stress in the process of individuation has been brought forward in several ways. Throughout Jungian theory, there is the presence of opposites. Those that have been discussed here are the two realms of the psyche, the conscious and the unconscious, which are two separate entities. One, the conscious, represents the realm of all that we see and know. The other, unconscious, represents all that we do not see or know. It is so dark and full of the unknown that we could not even begin to list the unknowns that are there. They are unfathomable to us.

Co-researcher, Jim, reported initially having a lot of confusion about himself and said that he was feeling “like nothing”. After taking the program, Jim reported that he felt “complete” and that now “I know my body”. Another set of opposites, which have been discussed, are the superior and inferior functions. In the process of individuation, the inferior function represents the unconscious realm.

The inferior function is the doorway to the unconscious and likened to the dark side of the self. Jung says it is the archetypal energy of the shadow. The process of individuation depends on the inferior function to reveal itself to the individual. Once revealed, the inferior function can be consciously worked with to be brought toward development. For it to be revealed demands the crossing, or stepping over a threshold symbolizing letting go of something old to be brought forth as in birthing something new. Co-researcher, Mary, let go of her experience of abuse from her mother and said, “I still don't understand why I was put in an institution, but I understand it's over and done with and I have to go on with my life. Before, I didn't

even want to.” Until now that experience, for Mary, has stalked her like a shadow figure.

There is little harmony in opposition and resistance. It has been discussed in this paper that in the process of individuation there is a search for the unknown, through the Hero's Journey. The journey represents the separation from old attitudes and views of reality where we relinquish the hold of the ego on the emergence of the Self as it moves toward wholeness. Co-researcher Carol had the perfect life set up before she had osteomyelitis. Carol has had to separate herself from her old attitude that life is a high-powered executive position with weekends being devoted to very physically oriented activities. She now is grateful to be able to get out of bed during the day and have the energy to take care of herself. As she describes herself, she says, “ I'm a real human being who misses being able to do the things that I love, but who has been able to make the best with what I have”.

Is this stress necessary to the process of individuation? Without the acknowledgement of differences there would be no possibility of movement toward interaction. With difference there is separation, which produces an energetic charge of moving energy. Movement creates change and the possibility of individuation. Sameness can be dull, static, with no edge of sharpness to separate and no possibility of movement to create change. The study indicates that all of the co-researchers were influenced by the presence of stress in their lives to a large degree. It was the one common reason for them to be enrolled in the class. This study also indicates that each one experienced drastic changes. Linda's panic attacks disappeared. Mary forgave her mother and put her in “the hands of God”. Hank recognized “the degree I was controlling and manipulating my environment”.

How does stress fit into our personal and collective mythology? By all indications, the personal myth or life story of all participants is based on those stressful events in their life, like the moment Barbara decided to leave her political career for nursing, or the day that Bob was able to administer his own insulin shot. It is the event and the time and place of it that provides relevancy to their lives. Through individuation, and

by means of mindfulness meditation, the participants were able to see far greater implications to their life. They described instances where their growth and greater awareness had opened new doorways to others in the collective community.

Is individuation beneficial to us? Each co-researcher gave accounting to the benefits they received through the classes. They reported a greater self-knowledge and awareness through the practice of mindfulness as well as the capacity to transform their relationship to their lives. Jim reported his new awareness of seeing women as a possible "friend" rather than just as a sex symbol. Maria's blood pressure dropped to the extent that she could come off of medication. Bill has "become more non-striving". There was not one report of the outer circumstances of their life changing. They did not win the state lottery or physically change their home environment. The change or transformation came through a change in self-knowledge.

I believe this paper has presented evidence to support the idea that there is a body/mind/spirit connection between mindfulness meditation and individuation. Both systems examine the mind and its contents. Jung's method is for the analysand to examine the mind through dreams and symbols in a dialogue with an analyst as a guide. Mindfulness is a meditation method of examining the constructs of the mind by providing attention to any thoughts, ideas, or visions that appear.

Historically, Jungian analysis does not deal directly with the body. It is Reich, Alexander Lowen, and Jungians such as Arnold Mindell who incorporate the body/mind connection. Jungian therapy does include creative expression through painting, sculpting, and body movement, but as a method to reveal the psyche. Mindfulness practice gives attention to the relationship to the body, noting any sensations, or emotional feelings that might be present.

Mindfulness also promotes awareness of attention to the use of our body and cultivates a non-abusive relationship with it. The spirit is what connects the mind with the body, like the egg in the batter that binds the ingredients to each other.

In Jungian theory, spirit is the connection with the Divine or spirit of God. For mindfulness, the breath, through awareness and the attention brought to it, can provide a profound body/mind connection.

Seven of the ten co-researchers mentioned the positive effects of the breath in their accounts. The breath is the grounding ingredient that provides body presence and access to embodiment. Bill describes how even though he was athletic, and always worked out he found through mindfulness that “I’ve not been in my body . . . I’m not there. Over the last year, I’ve been getting more into my body . . . I’m treating it better.” Bob focuses his awareness on his breath to help him to slow down when he reads so he “can get a lot more out of it”. Linda reported that even though she found the body scan difficult to do, she found herself breathing into her healthy breast. Maria used her breathing to help her in a stressful moment at the hospital when her mother was being operated on. Daryl reported that using his breath with awareness gives him “this clarity and I feel more competent and more in control of what’s going on”.

The final question is, “Does this study serve to qualify a relationship between mindfulness meditation and individuation?” This study has established a great many of similarities through the accounts of the co-researchers.

1. Both deal with suffering. Jung acknowledges it as a necessary opposition to happiness. Teachings of the Buddha common to all traditions of Buddhism include the Four Noble Truths. They teach that there is the truth of suffering, the truth of its causes, and truth to the end of suffering, which is manifested in liberation or enlightenment.
2. Each one uses the services of a guide. Jung said that the path to self-knowledge should not be taken alone and advised an analyst for guidance. Mindfulness utilizes an instructor in the case of Jon Kabat-Zinn’s model for stress reduction to be a guiding force.

3. Both include the symbolic process of death/rebirth. Mindfulness through awareness brings attention to the construct of the mind that has created the illusion of who we believe ourselves to be. Once this construct is seen for just that, what occurs is the death of what Buddhist thought calls the ego. Jung also sacrifices the ego but considers the ego to be an integral part of the Self. In individuation, the ego relaxes its position as the center of the personality and subordinates to the emerging Self.
4. There is an encouragement toward a relationship with the greater collective. In mindfulness it occurs naturally as a product of compassion. Already linked to the collective unconscious in the psyche, through individuation, the relationship to the collective is brought to consciousness.
5. Neither one is designed as a method to fix anyone. Mindfulness is of the thought that there is nothing that needs changing. It promotes illumination of everything that is present and embraces everything. Jung said his method of psychotherapy is not a medical treatment and its purpose is not to pathologize but to bring to consciousness what is already present through self-education.
6. Both are systems devoted to the individual. Jung emphasizes the role of the individual working one-on-one with an analyst as a guide. Mindfulness promotes the idea that everyone has his or her own unique inner connection to the practice. It also recognizes the power of group-generated energy for learning.
7. The goal of each is spiritual transformation. The Jungian process of individuation being the means toward self-realization and wholeness and a relationship to God. Although it is not stated in Jon Kabat Zinn's model in stress reduction, transformation or enlightenment is the ultimate goal of the practice of mindfulness in the Buddhist tradition.
8. Both systems are considered to be a "path with heart". For Jungians this means that our curiosity is aroused and we are engaged in the exploration of the mystery of

our self. It has personal meaning and wakens our true essence. Jack Kornfield (1993), who is a well known teacher of mindfulness, says that to follow a path with heart, it must have “a way of practice that allows us to live in the world wholly and fully from our heart”, that “will also include our unique gifts and creativity” (p. 12, 17).

9. The person is taught to carry on his or her own independent practice. Jungian analysis and individuation is a process of self-education and encourages continuing with the process independently beyond analysis. Mindfulness, in Jon Kabat-Zinn's stress reduction model, promotes the self-practice of mindfulness through the eight-week program. It provides graduate classes for those who find the support of group practice helpful.

10. There is an objective view that is taken by both systems. Jungian therapy does not pathologize and takes a neutral attitude toward what is present. Mindfulness brings a softening, non-judgmental attitude to whatever arises in the practice.

11. Neither system has a fixed view. Mindfulness stresses the impermanence of things and non-attachment to the outcome of anything. Jungian therapy works with a fluid style toward growth and change.

12. Both promote reconciliation. Mindfulness practice is the cultivation of awareness to what is already a part of you. Jung saw the culmination of the process of individuation as the union of two opposites.

The descriptions the co-researchers have given are full and rich accounts of what it is to experience living. Their courage and tenacity is astounding. As I went through the protocol, it became obvious that there was a lot of material to choose from in the descriptions. There were times that I wondered if I was looking at it from the angle that would honor the integrity of their processes. And, there were times I have wondered if I had taken on more than was prudent. Through all this time of persistent self-questioning I kept coming back to the connection I saw between

individuation and mindfulness meditation. One comes from a Western psychological viewpoint and the other from an ancient Eastern spiritual tradition.

There are two things, which surprise me concerning the descriptions. One is that the amount of educational background the co-researchers have does not appear to make a difference in their ability to express their experience. This would uphold the requirements in choosing subjects as stated by Polkinghorne (1989). He says that in the phenomenological research method, first the subject must have had the experience that is the topic being researched, and second, that the subject must have the "capacity to provide full and sensitive descriptions of the experience under examination" (p. 47).

The depth of the descriptions given by the co-researchers shows evidence that they undertook more than just a shallow consideration of their experience. Their expression shows a great deal of self-reflection and thought. The second factor that surprises me is the element of spirituality that prevails throughout the descriptions of the co-researchers. Although this program is based on the Buddhist teaching of mindfulness, it is stripped of religious connotations in its presentation. Yet, each co-researcher expresses their own unique understanding of spirituality. Bob talks of it as "close to prayer"; Maria calls it a "mystery", whereas Bill says he has found meditation to be his "spiritual path".

I have learned through conducting this study that every person has authentic experiences. That in itself has opened my capacity to listen with a much broader ear, and not to be so hasty to jump at a conclusive viewpoint. I feel as if I have lived with these people as they have been on their journeys. I have certainly been privileged to be present to the experience they have so generously shared. I discovered in the process that although all co-researchers gave descriptions that were present in all three stages of individuation, some of them had more content in one area than the other two stages. Some were lopsided in content distribution, and a few were evenly divided. It gave me an interesting look to see just what stage was more prominent at the time of the interview for each co-researcher. Judging by the overview, I could see

that each would be continually moving between the three stages in their own time and rhythm.

I learned to follow my instincts in the face of my own doubts in questioning if I were on the right path. I attribute my ability to successfully handle the stress of each part of these past two years, with progressively less anxiety, to the integration of my work in Jungian analysis, regular bodywork, and my daily formal mindfulness practice. The culmination of this final product has been a free flowing process regardless of the other circumstances in my life. Through mindfulness practice, Jungian analysis and two internship experiences in mindfulness-based stress reduction clinics, I have found the base I was looking for to proceed with my own career offering stress reduction programs in both the private sector and to teachers of public education.

My considerations of this work are that there may be some who undertake to teach the eight-week program thinking that they can teach it from a book or even teach it after they have gone through the internship without the personal commitment to daily formal practice. I can only trust that those who do not “walk their talk” will be encouraged to see the benefit of taking up the practice for themselves. Although there are attempts to establish guidelines for teachers, there are reservations by a lot of people in this field, including myself, about the attempt to regulate this work. Informed consent is an important point to consider. I have seen enough situations in class to know the importance of the experience and skill of the teacher.

Having completed this project, I am aware there are possibilities of many other topics this paper could have explored, such as the shadow figure being brought to consciousness through the practice of mindfulness, and looking at the similarities and differences between Jung and Buddhism. The breath alone could have been it's own study, physiologically, alchemically, and spiritually. Although this study has been a far greater project than I had first imagined, I am grateful for the discipline I have learned to incorporate in my professional life and the experience of working with my faculty members Drs Susan Rennie and Barbara Carter. (author's reflection)

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APPENDIX A / INFORMED CONSENT

You have volunteered to participate in a research project conducted by Marty Kleva, a graduate student in the masters program at the Vermont College of Norwich University. The final analysis of this project represents a section of the final thesis required for a Masters of Arts degree through Vermont College at Norwich University. As a co-participant in this study, you are entitled to any information pertaining to its collection, analysis, or reporting that concerns you personally.

In an audiotaped interview, as a participant, you will be asked to respond to the question: **“How has the practice of mindfulness affected your experience of stress?”** The interview will last approximately 60 minutes, after which you will have the opportunity to discuss any issues or concerns this exercise may have raised for you. Future access to the researcher will be made available for you to communicate any subsequent questions you may have. The information you share will be confidential and your name will not appear on the audiotape, transcript, or scholarly report. The tape and transcript of the tape will be destroyed once the project has been completed. Be informed that you may refuse to answer a question posed by the researcher and may discontinue participation at any time.

I understand the purpose of this study as stated above, and that this study involves :

1. An audiotaped interview lasting approximately 60 minutes.
2. My response to the question: **“How has the practice of mindfulness affected your experience of stress?”**
3. An opportunity for me to address any concerns.

I consent to participate in this study as outlined above and acknowledge receipt of a copy of this consent form.

Participant's Printed Name

Participant's Signature

Date