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Experiences of Radical Personal Transformation in Mysticism, Religious Conversion, and Psychosis: A Review of the Varieties, Processes, and Consequences of the Numinous

Harry T. Hunt
Brock University

After an overview of the phenomenology of numinous experience in mysticism, conversion, and related states in psychosis, the intersection and distinction between contemporary transpersonal psychologies of spiritual development and psychodynamic/clinical perspectives on pathological states is addressed from cognitive-developmental, psychophysiological, personality, and socio-cultural perspectives. Debates about the nature of mystical and conversion experiences have a long history in the psychology of religious experience and raise fundamental methodological issues concerning the potential inclusiveness or narrowness of the human sciences. A genuine psychology of numinous experience and its impact on life histories must find its way between the twin dangers of "over-belief" and false reductionism.

The experiences and self transformations associated with mysticism and religious conversion, and their problematic relation to parallel phenomena in psychosis, have been a continuing theme of the human sciences. Nietzsche (1888) was perhaps the first to call for the scientific study of ecstasy as a defining dimension of human development and creativity. William James (1902), in his seminal *The Varieties of Religious Experience*, documented the view that spontaneous religious experience, while never proof of metaphysical truth, is associated with a sense of meaning and purpose which is itself salutary for self esteem and capacity for empathy. He called attention to a cross-cultural experiential core most explicitly developed in the world mysti-

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cisms, with their ecstatic intuitions of an all-embracing unity or oneness, however variously defined.¹ For James these experiences, while certainly emotional, are primarily noetic or cognitive, being "about" a unity that in ordinary language must remain ineffable or paradoxical.

Rudolf Otto (1923) began the formal phenomenological analysis of this experiential core of religious experience, which he termed the "numinous." The sense of the numinous is separate from the dogma and mythology which is its partial, culturally mediated schematization. Otto distinguished a more personal aspect of the numinous, which he called "creature feeling." This is the feeling of total dependency in the face of an experience that "has" the experient, rather than the other way around, and tends to become schematized in doctrines of sin, fate, or karma. Its more impersonal aspect Otto termed *mysterium tremendum*. *Tremendum* describes a sense of awe — blissful, dreadful, or both — and an overpowering sense of force and/or urgency. It tends to be "contained" in concepts of divine power, energy, or *mana*. The *mysterium* dimension includes a sense of fascination, wonder, and mystery in the face of an object which is "wholly other" and beyond specification, except as the paradoxically full void of eastern and western mysticism.

Similarly under the impress of Husserl's phenomenology, Heidegger (1927) located the sense of the holy in the unveiled human experiencing of the indefinite future as a dimension of openness into the unknown — felt initially as a "being-toward-death." The ultimate noetic object of mysticism, beyond all schematizations, is Being as such, our capacity for wonder and awe at the sheer "facticity" that anything is at all. Heidegger distinguished a more personal aspect of "authenticity," or sense of "I am," that emerges from accepting our being-there in the face of temporal openness. Later, he emphasized more direct intuitions of Being, with its emptiness and abstract compassion strikingly reminiscent of Meister Eckhart (Caputo, 1986) and Mahayana Buddhist meditation (Guenther, 1976). Again, we have two poles of immediate religious experience, one more prominent, as we will see, in spontaneous peak experience and western religious conversion, and the other moving into the more impersonal and boundless dimensions of the "other worldly" mysticisms.

There have been three relatively distinct eras in the social science of religious-mystical experience. Between about 1890 and 1920 there suddenly appeared the major empirical-descriptive works of Starbuck, Myers, Bucke, Coe, Leuba, Underhill, Von Hügel, and Sanctis, with seminal theoretical writings by James, Weber, and Durkheim. The period through the 1950's was largely dominated by Jung and the Jungians, while the contemporary period commenced with (1) Maslow on peak experience and self actualization,

¹ The cross-cultural commonality of a mystical element in all religiosity has not been without its controversy (Katz, 1978).

which grew into transpersonal psychology, with its focus on Eastern meditation, (2) research on altered states of consciousness, especially psychedelic drugs, and (3) an empirical anthropology of shamanism and nativist movements.

It seems noteworthy that each of these eras has acknowledged a relationship between religious-mystical experience and psychosis. James (1902) spoke of the "inverted" or "diabolical" mysticism of madness. Starbuck (1899) pointed to the common adolescent onset of both conversion experience and psychosis, with the occasional transformation of the former into the latter. Jung (1938/1960), Sullivan (1925), and Boisen (1936), agreed that Otto's numinous, in its more overwhelming aspects, was *the* emotion that is characteristic of early schizophrenic onset. Sullivan (1953) later replaced this early usage with his term "uncanny emotion." Meanwhile, transpersonal psychologists have become increasingly interested in distinguishing "spiritual emergency" (Grof and Grof, 1990) and "mysticism with psychotic features" (Lukoff, 1985), and their potential for transpersonal development, from the more chronic psychotic patterns warranting hospitalization and medication.

It would be arbitrary in the extreme to consider only the experiences and personal transformations associated with mysticism and conversion and to ignore the spectrum of acute psychotic states which are at times strikingly similar, and surely transform personality as thoroughly — if negatively. In the language of Boisen (1936), that would be to consider only the phenomena of "spiritual victory" rather than those, often similar in their initial stages, that eventuate in moral stagnation, personal withdrawal, and "spiritual defeat." While we concentrate here on mystical and conversion experiences, it will become apparent that mysticism and psychosis contextualize each other as different patterns of organization of some common dimensions of experience.

Any discussion of the layered contexts out of which mysticism, conversion, and parallel psychotic states emerge, must attempt to reconcile a complex of seemingly contrary features: thus, we will contrast the importance of these experiences in mid-life development and old age with their embodiment of the object-relations themes of early childhood; their cognitive, noetic aspect with their frequent paroxysmal shifts in arousal; and their individual predisposition in a personality dimension of imaginative absorption with their social basis in mystical and prophetic movements. Finally, the question of how and why these experiences are often held to be "transformative" and "self healing" will take us beyond the mainstream methodological assumptions of contemporary psychology toward the necessity of life history approaches. It raises the issue of whether even an expanded, holistic human science can fully address the teleologies of value and meaning intrinsic to these experiences.

Phenomenological Characteristics

1. *Mystical and Conversion Experience*

Depending on the phrasing and detail of the questions, contemporary surveys of the North American public find between 30–50% claiming some form of direct mystical experience (Spilka, Hood, and Gorsuch, 1985). The following accounts, which can be considered prototypical of spontaneous mystical states, are taken from Bucke's (1901) early compendium, the first being his own experience:

He found himself wrapped around as it were by a flame coloured cloud. For an instant he thought of fire . . . the next he knew that the light was within himself. Directly afterwards came upon him a sense of exultation, of immense joyousness accompanied or immediately followed by an intellectual illumination quite impossible to describe . . . He saw and knew that the Cosmos is not dead matter but a living Presence, that the soul of man is immortal . . . that the foundation principle of the world is what we call love and that the happiness of everyone is in the long run absolutely certain. (p. 8)

There came a suffusion, as of a delicate cloud or haze which . . . was more invasive than light, more penetrating than heat, more inreaching than electricity. It was as if I had been plunged into a bath of fluid more subtle and permeating than ether . . . The rapture, the exaltation, the divinity, of that moment passes knowledge. Then swiftly came the awe of the mysterious presence that filled me . . . This grew until I found myself rising and expanding into the Infinite, being diffused and lost therein. (p. 274)

Probably the best empirical guide to the descriptive dimensions of such experience is found in the content analyses of Laski's *Ecstasy* (1961). She found that such experiences, which may or may not be given an orthodox religious interpretation by those who have them, begin with an initial sense of "loss" and even "desolation" — including loneliness, the restrictiveness and limitation of one's identity, and loss of felt significance in usual desires and ambitions. What then supervenes as "gain" includes a sense of oneness in all things, joyful release into a sense of new life for a perfected and expanded self, and either an enhanced sense of love and compassion or of an intrinsic, intuitive knowledge. This sequence of loss and gain seems to be the basis for the widely discussed "death–rebirth" aspect of ecstatic experience. Significant for the cognitive perspective to be outlined later, these experiences of gain or renewal are mediated by what Laski terms "quasi-physical sensations." These range from clearly metaphorical usages ("I felt a surge of uplifting faith") to more vividly imagistic and hallucinatory experiences ("I felt a sensation of rising up off the ground"). Quasi-physical sensations are reflected in the use of "up" words and phrases (floating sensation, buoyancy), "inside" words ("an enormous bubble swelling inside my chest"), "light" and "heat" words (flashing, ebbing light, "burning with love"), "darkness" words ("the brightness of a lucid darkness"), "enlargement" words (expanding,

bursting), and “liquidity” words (bubbling inside, melting). Almaas (1988) similarly locates different aspects of numinous experience, such as strength, will, power, compassion, joy, each with its characteristic physiognomy, e.g., strength felt as hot and expansive.

Laski (1961) and Almaas (1988) also find two contrasting poles of numinous experience. On the one hand there are the more personal realizations of “presence” or “I am.” These are best exemplified by Maslow (1962) on “peak” experiences, Gurdjieff (1975) on “essence” in states of “self-remembering,” Reich (1949) on vital presence and energization in bioenergetic therapy, and Laski on “Adamic” ecstasy (see below). We will see that many experiences of conversion in evangelical Christianity also belong here. (“Plateau” and “flow” experiences might also be considered at this point, but following James the focus here is on the more intense forms of numinous experience.) At the other extreme are the experiences of a complete dissolution of self identity into the boundless or formless dimensions of void, Brahman, or Godhead, which Laski terms “withdrawal ecstasy” and which Almaas finds potentially dislocating and premature for Western students without some initial grounding in the “I-am” experience of “personal essence.”

Bucke’s collection includes the following account of what we are terming “personal presence”:

I went out in a happy tranquil mood, to look at the flowers The pleasure I felt deepened into rapture There was and is still . . . a very decided and peculiar feeling across the brow above the eyes, as of tension gone, a feeling of more room Another effect [is] that of being *centered* or of being *a center* The consciousness of completeness and permanence in myself is one with the completeness and permanence of nature I often ponder on it and wonder what has happened — what change can have taken place to so poise and individualize me. (1901, p. 272)

This account can be compared with a compendium of accounts from western students at advanced stages of Buddhist and Vedantist meditation, practices which can provide a more organized access to the impersonal “openness” of classical mysticism:

These subjects describe a sense of transcendence beyond the normal boundaries of self in terms such as “the duality between subject and object is overcome,” “forgetting about my individuality . . . forgetting who I was,” and “I didn’t even know that I was a human being . . . there was complete merging where one loses body consciousness . . . there was no personality left.” A different sense of reality, involving an expansion in the sense of space and/or time is combined with a sense of calm, serenity, and stillness: “A field of awareness that is cosmic . . . there was no sense of limitation, there was . . . awareness . . . endless, boundless, oceanic.” “Although there is nothing, now I am experiencing that nothingness as enormous . . . like out of space . . . the longer I can stay in it . . . the more I see how vast it is . . . There’s no form, it’s blackness, and what I find is that it’s getting bigger.” (Gifford–May and Thompson, 1994, pp. 124–127)

The experience of personal presence involves a sense of joy, renewal, and purification, with an emphasis on "inside" and "enlargement." Rather than a loss of self, there is an emergence of a more fundamental and complete identity — at times with the sense of being a "new person" or "becoming who one truly is." Almaas (1988) characterizes the experience of "personal essence" as personal and contactful, entailing a sense of fundamental autonomy. Laski termed this "Adamic," because the more orthodoxly religious may come to feel that they have experienced the state of Adam before the Fall, while others identify the state in terms of becoming "primal" or "natural," the gnostic Anthropos, "noble savage," or "innocent child."

At the other end of the continuum, the mystic paths of the eastern and western traditions move toward a final dissolution of all sense of self. Underhill's (1911) classic account of western mysticism identifies multiple stages, the first of which, "awakening," seems close to Adamic ecstasy. This is followed by experiences of "purgation," involving a painful struggle for release from a frozen, shell-like sense of self, and leads to "illumination," or the experiences of fusion with other persons and physical nature that Stace (1960) termed "extravertive" or "nature" mysticism. That can be followed by the "dark night" of despair, blankness, and anhedonia which, if accepted, can lead into the freedom of the final "unitive stage," or Stace's "introvertive" mysticism. There the self is sensed as one with the Absolute. Wilber's (1995) dimensions, based more on the eastern traditions, move from the "psychic" level, emphasizing an awakening of soul as in nature mysticism and nature-focused shamanism, to the "subtle" level and its union of soul and God. The "causal" level describes the sense of a formless awareness as the source of all existence, reflected in the Buddhist void and Eckhart's impersonal Godhead. A "nonduel" dimension involves the realization that manifestation and emptiness are inseparable.

There has been a separation between the study of mystical experiences and that of the conversion experiences common in evangelical and Pentecostal Christianity and related movements of prophetic enthusiasm (Hood, 1995). Transpersonal psychologists have understandably concentrated on the more individually and highly developed forms of mysticism (spontaneous and meditational), also reinforced by Weber's (1922) important distinction between an experience-predominant mysticism and more ethically centered propheticism. There is in evangelical religiosity a more extraverted emphasis on doctrines of moral conduct, socially manifested "charismatic gifts" such as faith healing and glossolalia, and a tendency to postpone a more formless "unity" until a projected afterlife. Accordingly, it is interesting to see how similar actual descriptions of "born-again" conversions can be to the presence or Adamic side of mysticism, and the relative absence of specific doctrinal elements in these initial phenomenologies (Hood, 1995; Hyde, 1990; Starbuck, 1899). Starbuck's early collection of first person accounts, from one of the

major eras of evangelical enthusiasm, shows the period preceding conversion to be one of moral crisis, with strong feelings of imperfection, incompleteness and unworthiness — as in Laski's "loss" and Otto's "creature feeling." The conversion experience itself is felt as a sudden resolution involving felt joy and peace — "Inexpressible joy sprang in my soul . . . a sudden transport of joy" (Starbuck, 1899, p. 83). There is a sense of renewal and entrance into a new life of deep confidence, spontaneity, and freedom — "It was like entering another world — a new state of existence. Natural objects were glorified — I saw beauty in every material object in the universe" (p. 120). George Fox, the founder of the Society of Friends (Quakerism), describes this as follows: "All things were new . . . I knew nothing but pureness, innocency, and righteousness . . . so that I was come up into the state of Adam, which he was in before he fell" (Knox, 1950, p. 153).

We can also see how this sense of a primal presence and authenticity could pass over, as in early Mormonism or the Free Brethren of Europe, into Antinomianism — "beyond good and evil" doctrines of the impossibility of any further sin. Then, as Knox (1950) says, the renewed Adam goes in search of his respective Eve(s), or vice versa, and small radically egalitarian and communal sects appear. The relation of felt vitalization in peak experiences to more direct expressions of antinomian social and sexual conduct is also clear from Reich and 1960's communalism.

To complete this overlap between mysticism and the experiential dimension of evangelical Christianity it is useful to note Starbuck's (1899) survey data on later life "sanctification," appearing at least two decades after earlier conversion experiences. Less immediately intense than the unity states of other-worldly mysticism, sanctification nonetheless has much of the same inner stillness and interiority — with a similar emphasis on altruism and compassion, complete self surrender, and sense of oneself as a vehicle through which the divine is expressed. In both mysticism and sanctification there are descriptions of a sensed "transparency" — "I felt pure and clean so that I wished I were made of glass so everyone could look within my heart" (p. 379).

2. *Relationship to Psychopathology*

The relation between mystical and conversion experiences, on the one hand, and states of consciousness in psychosis, especially in the family of schizophrenias, on the other, is at the heart of any valuation of the numinous in human life. Where do they overlap, where do they differ? Few would probably now take the most conservative psychiatric position, often associated with Freud, that all major alterations of consciousness are by definition psychotic, making spiritual experience at best a culturally accepted psychosis. That view would lead us to equate the person who has realized satori in Zen Buddhism with the paranoid schizophrenic, and there would seem to be obvi-

ous differences between them. Similarly, few would now espouse the opposite simplification that acute psychosis is by definition a misunderstood mysticism, lacking only the right guidance to avoid hospitalization. That view would then have to explain why the traditional native societies that sanction some trances as spiritual also distinguish such experiences from destructive or demonic states. Indeed, where western style psychiatric diagnosis is available, these demonic possession trances tend also to be labelled "psychotic" and treated with hospitalization where native "exorcism" fails (Ward, 1989). Kundalini yoga is similarly seen in traditional India as having the potential to "go wrong" and end in madness (Eliade, 1958; Krishna, 1967).

In contrast to such simplified views, there are the investigators who describe a growth and even spiritual potential within some psychoses, and a potential for psychotic-like crisis within some spiritual experiences. Thus, psychiatrists from Sullivan (1925, 1953), French and Kasanin (1941), to Bowers (1974) have found that acute schizophrenic crisis can at times have a healing and maturational potential, often symbolically expressed within delusional and hallucinatory experiences. Boisen (1936) and Van Dusen (1972) go further in suggesting that spontaneous remission in schizophrenia can follow the occurrence of classical mystical experiences. Boisen emphasizes the acceptance in such cases of a sensed cosmic catastrophe and "death," most common in catatonic patients, while Van Dusen cites occasional reports of "white light" experiences dissolving "lower" or malevolent hallucinatory voices.

More recently, several transpersonal psychologists have traced a potential for transformation within some ostensible psychoses in terms of "spiritual" features that could lead to their re-classification as "spiritual emergency" (Grof and Grof, 1990) or "regression in service of transcendence" (Washburn, 1988). Lukoff (1985) has suggested that such modifications in traditional clinical diagnosis, now included in DSM-IV-R, are warranted by some combination of features like ecstatic mood, sense of new knowledge, perceptual alterations, and delusions that are more related to mythological themes — as found earlier in the Jungian orientation of Perry (1974). Nelson (1994) addresses similar criteria, and adds onset later in life to Lukoff's list of acute, reactive onset, good previous adjustment, and low risk of violence and suicidal behavior.²

It is significant that the more we move away from "molar" criteria, like final outcome or growth potential, toward the more "molecular" level of spe-

²Nelson (1994) has developed a model for distinguishing between psychotic vs. spiritual potential in terms of predominating chakras and their developmental levels. Whether his mixing of developmental and states of consciousness aspects of the chakras is ultimately viable, his criteria of the cognitive-emotional developmental level involved at crisis onset, the level pre-crisis, and the developmental directions of shift during the crisis, are a considerable refinement over previous approaches.

cific transformations in attention, perception, thought, and emotion, the more difficult it becomes to isolate features that would be by definition psychotic or mystical. Indeed, any specific phenomenon of consciousness regarded by either literature as prototypical of mysticism or schizophrenia turns out to be present in some form in the other (Hunt, 1971). It has become a commonplace, for instance, that the blissful affect of Maslow's peak experience can also occur in early schizophrenic and manic onset (Chapman, 1966; Lukoff, 1988a) while experiences of anguish and dread can emerge in both early and later stages of meditative practice (Luk, 1960; Walsh, 1977).

Similarly, although the experience of dissolving into a void or oneness is described as characteristic of advanced meditation and mystical states, often with motionless catalepsy (Eliade, 1958), much the same phenomenon falls within what Bleuler (1911) termed the "generalized blocking" of perception, thought, and movement in schizophrenia. Hospitalized patients describe these seizure-like states as "trances" and "blank states," and they have been compared to temporal lobe seizures (Chapman, 1966). Like mystical accounts these experiences are frequently described as "death" or "just emotion":

At times there is nothing to hold the mind and this is when I go into a trance. When the mind stops receiving messages from things around me I don't react to anything that happens. You can very easily go into a trance — it goes on as soon as the mind stops and then you realize you are not actually seeing anything or hearing anything. It is a delight . . . It's a condition of unity. (Chapman, 1966, p. 231)

Lest one assume that such void-cessation states are part of the "mystical features" in schizophrenia, especially given Boisen (1936) on their role in some spontaneous remissions, it should be noted that Chapman's copious accounts come from hebephrenic, poor prognosis patients. Indeed, just as some experiences of "generalized blocking" in schizophrenia can be good prognostic signs and others demonstrably not, Underhill (1911) finds a similar distinction in the Christian mystics. There, some cataleptic trances are experienced as divine openings, while others are felt to be disorganizing and exhausting, with no outward behavioural differences and often occurring in the same practitioners.

As a final illustration, certain body image hallucinations, coupled with "first rank" symptoms of "made" thoughts and feelings, are often seen as specific to schizophrenia (Landis, 1964). Angyal's (1936) group of chronic catatonic patients described body experiences of hollowness and not holding together, with internal forces and liquefied or electric substances moving within — often accompanied by extreme dizziness and physical disorientation:

He has "no inside of the body, only a frame." "The inside of the skull doesn't feel at all, it is like air." ". . . [T]he stomach and the top of the skull are open . . ." "The spinal column or something passes through the flesh." ". . . [T]hey pull out another person from my body." (pp. 1039–1042)

Searles (1979) sees such hallucinations as defensively frozen metaphors of intolerable anguish and emotional pain. Yet, in addition to the prominence of similar sensations in shamanic initiation visions (Furst, 1977), these experiences seem related to the hollow body and chakra experiences of kundalini yoga and inner heat in Tibetan Buddhism (Govinda, 1960). Accounts of inner streaming and flowing sensations, often associated with anxieties of dissolving, bursting, or falling, are also part of bioenergetic therapy (Reich, 1949) and the methods of Almaas (see below). Nonetheless, Greyson (1993) did not find the full kundalini sequence in hospitalized schizophrenics, suggesting that their rapid disorganizing and paroxysmal shifts in consciousness may usually prevent such developments.

Here we approach again, on more phenomenological grounds, the molar level of analysis that more successfully distinguishes between mystical experience and related phenomena in the schizophrenias. Mysticism and schizophrenia emerge as two competing organizations of the same underlying dimensions of experience, but very differently patterned — like the reversible figures of gestalt psychology that form distinctly different shapes out of commonly shared lines. For Angyal (1965), neurosis is a patterning of the same basic traits that define healthy personality (dependency, autonomy, etc.), but in the context of predominant despair rather than of hope and optimism. He terms this reversible organization of neurosis and health “universal ambiguity,” a concept that we can also extend to the domain of radical transformations of consciousness. It is not the experiential phenomena *per se* but their patterning, sequence, and timing that will distinguish between states pointing toward maximum openness and novelty or toward predominant contraction and defensive stasis. Mysticism and schizophrenia are organized around a common dimension oscillating between openness and stasis. While mystical experience has its own form of stasis, reflected in the anhedonic “dark night” of despair, and psychosis has its own delusional and manic forms of expansiveness, the difference comes in their patterning and rigidity — moving toward an openness to and acceptance of unknown “mystery” in Otto’s numinous or an experiential shutdown in the “negative symptoms” of schizophrenia, which Eigen (1986) refers to as the “psychotic core.” Two related accounts of this openness–stasis dimension come from the sort of existential analysis begun by Heidegger and from the moral–ethical perspective of Anton Boisen.

In existential terms the white light/cessation experience of mysticism and chronic schizophrenic withdrawal can be understood as contrasting responses to a specifically human openness of temporality. The full experience of mysticism would be its maximum acceptance and schizophrenia its maximum potential avoidance. For instance, at the later stages of meditative realization, a sensed dissolution into light or voidness leads to a subsequent aware-

ness of each life situation, unfolding moment by moment, as somehow known and accepted in advance as an emanation of that light. Here is an account from Tibetan Buddhism:

With the realization of the realm of free space in which all things are identified, anything which enters experience is known to be unborn in its origin. This is the attainment of the ultimate refuge Detached, without any tendency to slow the natural progression from unitary totality to . . . the following moment, no fear arises . . . to begin the process of action–reaction producing attraction and aversion Rather there is a continuous sense of amazement at the ineffable beauty and sublimity of . . . the perfection of the moment (Tarthang Tulku, 1973, p. 106)

With respect to the cognitive–noetic dimension of such experience, we could say that since time is not a substance, “space,” “light,” and “darkness” are the only sensory qualities that can metaphorically evoke and “contain” its openness, without a false specification (see Hunt, 1984).

By contrast, schizophrenia is understood by the existential–phenomenological psychiatrist Minkowski (1933) as a premature and falsely specific attempt to freeze or crystallize the openness of time ahead. This is reflected in delusional paranoia, which Minkowski sees as an attempt to hold off the dreaded annihilation or “dying” of the generalized blocking state. Systematized delusions, like Schreber’s (1903) apocalyptic end of the world, can similarly “explain” in advance anything that happens, but with such over-specificity that the “freedom” and openness of human experience is thereby effectively “subducted.” At the extreme, in chronic states, time may actually be experienced as “stopped,” with a concomitant anhedonia, felt separation of perceptual modalities, and loss of semantic meaning.

Sometimes everything is so fragmented, when it should be so unified. A bird in the garden chirps, for example. I heard the bird, and I know that he chirps, but that it is a bird and that he chirps, these two things are separated from each other. There is an abyss It is as if the bird and the chirping have nothing to do with each other I did not know that death happened this way. The soul does not come back anymore I continue to live now in eternity, there are no more hours or days or nights The others walk to and fro in the room, but time does not flow for me. (Minkowski, 1933, pp. 285–286)

The primary question in evaluating any state of consciousness becomes whether it opens the person to a greater fullness of felt meaning and spontaneity or whether it fixates and shuts down. Bliss and dread, by themselves, can do either.

No one has surpassed Boisen (1936), a pastoral counsellor who himself suffered several schizophrenic episodes, in the force of his statement that the relevant contrast is not between pathology and health in either religious experience or psychosis, but between “spiritual defeat” and “spiritual victory.” On the level where people live, mental illness and its cure can not be

separated from issues of moral failure and victory. Both religious experience and psychosis arise out of a common dimension of inner emotional crisis with "a keen awareness of ultimate loyalties and unattained possibilities" (p. viii). Both can involve radical personal transformation, with the difference primarily one of outcome: "redemption" where the person finally comes into harmony with his/her highest values, "psychosis," where such synthesis is not attained. "The patient may get well, but he may not solve his problem" (p. viii). This lived moral dimension is clear enough in the crises of religious conversion and purgative/dark night mysticism, but it is equally clear in the sense of personal failure, defeat, and loss of self esteem that are not incidental to psychotic breakdown but describe its most immediate personal impact. This is not, of course, to deny the differing depths and forms of such suffering, or potential genetic predispositions to schizophrenia, or its disastrous family dynamics, or anomalies of brain dopamine. But just as the mystic, religious convert, and some recovering schizophrenics are conscious of specific gains in the value and meaning of their lives, the chronic psychotic, at least where delusions do not predominate, is more often conscious of a loss and defeat — of the specific absence, for instance, of Erikson's developmental virtues of hope, will, purpose, and competence.

3. The Behaviors of Enlightenment: Potential Aftereffects of Mystical and Conversion Experience

James (1902) suggested that the final valuation of any state of consciousness must rest on its "fruits" in subsequent living. Nothing could be more distinct from the attitudes of spontaneity, "letting be," and compassion in developed mysticism, than the loss of vitality and the apathy of chronic schizophrenia, or conversely the frenetic hyperactivity of acute onset.

Transformations in sense of self, following experiences of spiritual realization, can have marked effects on personal conduct and a major social impact on others. This goes beyond the common need to proselytize and educate after conversion (Starbuck, 1899), near-death (Ring, 1980), and UFO experiences (Mack, 1994). It can include an immediate "charismatic" effect, Weber's term for the third person version of the first person "numinous." This is well illustrated by this account from the sister of the woman whose experience of presence was quoted above (Bucke, 1901, p. 272):

Her looks and manner were so changed that she scarcely seemed the same person. There was a clear, bright, peaceful light in her eyes, lighting her whole face, and she was so happy and contented . . . as though some heavy weight had been lifted and she was free . . . I shall never forget it. (p. 273)

These transformations of character, when they do occur, seem in the first instance extensions into behavior of the phenomenology of mystical and

conversion experience — a moment by moment openness to events being sensed as an ongoing revelation and guidance. The following is a compendium of these claimed changes in sense of self, conduct, and value, drawn from James (1902), Laski (1961), Maslow (1962), Almaas (1988), and Washburn (1994):

(1) An attitude of equanimity and acceptance, or “yea-saying,” with a resulting appreciation of life and sense of the world as a resplendent, magical, or compassionate gift. Paloutzian (1981) reports an increase in a “purpose of life” measure for at least six months after conversion.

(2) A sense of autonomy and detachment. Almaas and Maslow speak of a sense of becoming who one truly is, independent of one's history of identifications with others. This is James's “strength of soul,” also supported by studies showing elevations in self sufficiency and optimism after conversion (Hyde, 1990).

(3) An authentic and spontaneous allowing of oneself to be seen by others as one truly is, without need for dissembling, which Almaas and Washburn term “transparency” and Maslow “childlike innocence.” James similarly speaks of a “purity” that leads to a dropping of relationships that frustrate a genuine openness.

(4) A change in values away from more worldly, material standards toward altruism and compassion, what James terms “charity.”

(5) A felt cognitive enhancement and clarity that Laski calls “improved mental organization” and Washburn a “tertiary” cognition of heightened intuition, self knowledge, and empathy. Welch (1983) describes an enhanced sense of “context” in interpersonal relations, or “acting from field.”

While these transformations in sense of self are clearly different from the schizophrenias, the latter offer a kind of negative caricature of the above list with their loss of meaning, interpersonal hyper- and hypo-sensitivity, passivity, and confusion/delusional clarity. While such clinical–diagnostic failures have often been approached from a developmental perspective, we must also ask how in cognitive and developmental terms these positive transformations are to be understood, and what would be their appropriate research methodology.

Growth Potential and Clinical Dilemma in Three Related Areas: A Developmental Perspective

1. LSD and Psychedelic Drugs

Research on psychedelic drugs, unfortunately terminated by the early 1970s and more recently revived (Strassman, Qualls, Ulenhuth, and Kellner, 1994), could be said to constitute a kind of “laboratory test” for Nietzsche

and James on the nature of intense ecstasy and its role in personal development. In retrospect, LSD research provides its own striking evidence of mystical and psychotic experience as competing organizations of the same crisis mediated "material" of immediate consciousness, as well as illustrating some of the methodological problems in trying to assess claims of major personal transformation.

It soon became clear that the initial debates between those researching LSD as psychoto-mimetic, psychedelic and mystico-mimetic, or psychotherapeutic were more than semantic. Psychiatric studies of "model psychosis" (Berzel, Travis, Olinger, and Dreikurs, 1956) tended to report negative experiences, while those using more supportive settings (Masters and Houston, 1966), or even overtly religious ones (Pahnke and Richards, 1969), elicited reports of new meaning in life and religious revelation. Although Pahnke and Richards, in their famous "Good Friday" psilocybin study at Andover Theological Seminary, appear to have under-reported fears and confusions in their subjects (Doblin, 1991), it is also clear that two very different patterns of drug experience emerge in this literature. Thus Ditman, Tietz, Prince, Forgy, and Moss (1967) found that those with "bad trips" requiring later therapeutic intervention described significantly elevated fears of insanity and death, perverse sexual feelings, despair, and a sense that time had somehow stopped. Meanwhile, Linton and Langs (1964), echoing Angyal (1936) above, found two clusters of negative LSD experiences. Both lacked the cognitive portent and affective intensity of "good trips," with one defined by time stoppage and "first rank" impressions of external control or possession, and the other based on anomalies of body image, nausea, weakness, and dizziness.

The methodological difficulties of researching the many claims of major personality change seem obvious. While there was a growing consensus from psychiatrically oriented studies that the worst psychiatric reactions occurred with the borderline, schizoid, and pre-psychotic (Ditman et al., 1967; Strassman, 1984), only a few of the supportive setting or "psychedelic" studies included base-rate personality and cognitive measures (Fischer, 1975; McGlothlin, Cohen, and McGlothlin, 1967). All the problems of appropriate controls in psychotherapeutic research reappear here, with the same lack of agreement on results (Barber, 1970). Mogar and Savage (1964) found significant decline in clinical symptoms and MMPI psychosis scales in their clients two months after a single psychedelic session, with decreasing differences over a year. McGlothlin and Arnold (1971) in a long term follow-up on psychedelic use found no differences from controls in standard personality measures, but significant differences in attitudinal self-ratings of self-understanding, tolerance for others, non-material values, aesthetic appreciation, and magical ideation. These changes are consistent with our preceding list of transformations in self with mystical experience, and with Tart's (1991) find-

ing that psychedelic usage, while self-limiting over time, can play a significant role in leading people into long term meditation practice.

Grof's research on both multiple, low dosage and single, high dosage LSD sessions best integrates the competing and complementary strands of psychedelic research. In a series of studies, Grof (1980) found that essentially all subjects, regardless of personality, expectation, or psychiatric status, eventually began to experience a "death-rebirth" crisis, with dread and fear of dying, difficulties in breathing, tachycardia, muscular myoclonus, and paralysis. This state also seems identical to the extreme crisis states that are part of intense religious conversion experience (Knox, 1950). Although we will need to consider this phenomenon more critically below, Grof interprets it as a revival of the "peri-natal" matrices of Rank's trauma of birth. Normal subjects usually come to this crisis condition only after initial aesthetic and religious experience, while psychiatric patients tend to enter it immediately and more severely, but for both it is acceptance and non-resistance that leads through this "dying" into classical mystical experience. Grof's (1988) more recent use of "holotropic" breathing techniques, entailing sustained hyperventilation, elicits much the same experiential sequence and so brings this work even closer to the precipitating conditions of evangelical conversion and purgative mysticism.

2. *The Psychotherapy of "Being" in Borderline, Schizoid, and Narcissistic Clients*

One way to trace how the themes and processes associated with psychosis can become implicated in transpersonal development is to consider the case history literature of Winnicott (1971), Khan (1974), Bion (1970), and Kohut (1971) on psychotherapy with what are variously termed borderline, schizoid and/or narcissistic clients. These authors all assume that these adult difficulties begin with trauma/deficit in sense of self and self esteem in the first two years of life. While we will see how similar the thematics of their experiences are to the crisis stages of conversion and mysticism, it also seems clear that most psychedelic researchers would have considered such clients poor risks for LSD psychotherapy — raising the likelihood of different developmental levels in those drawn toward consciousness transformation.

Winnicott (1971) describes a fundamental deficiency in sense of feeling real, alive, and present in these clinical conditions. There is an underlying futility and a painful separation from a longed for "true self," associated with a defensive grandiosity and/or social withdrawal — and an ambivalent longing for what can be variously sensed as oblivion, death, emptiness, or madness (Khan, 1974). For Winnicott, and Bion (1970), this sensed catastrophe has already happened in the hypothetical early infant "agonies" of falling forever, bursting, or dissolving, stemming from failures in early holding and mirroring. Therapy becomes a "regression to resourceless dependence" (Khan,

1974), which may eventuate in overt psychotic episodes, and involves the sort of intense "mirror" transferences mapped by Kohut (1971) and Searles (1979). Most relevant here is the search in these patients for what Khan (1974) calls transformative "happenings" or "epiphanies," using James Joyce's term for "sudden spiritual manifestations" that are somehow felt to be curative. Thus, sexual addictions, cocaine, or heroin may be pursued as if a kind of "private religion," in the search for at least a temporary vital empowerment and feeling real. One is also reminded of James's (1902) comments on chronic alcoholism as a "lower" mysticism.

Winnicott (1971), in a fashion similar to Kohut (1971) and more recently Bach (1985), suggests that there are two general classes of dilemma in human life, one resting in the dynamics of relating and "doing" first traced by Freud, the other in these dilemmas in sense of Being. Here, the search for a sense of self and meaning in life become predominant. The state specificity and experiential sensitivity of this orientation makes it the point where contemporary dynamic psychotherapies approach the personality measurement research on the dimension of absorption/openness to experience (see below). While Winnicott tends to regard dilemmas of Being, and the roots of spirituality, as stemming from deficiencies in sense of self from the first two years, his later writings can come very close to our use of Angyal (1965) on an intrinsic spiritual dimension as the positive organization whose negative is psychoticism.

Such an experiential dimension is in itself not inherently primitive. Provisionally using the vocabulary of Erikson's life-span stages, we can see that Being issues would alternate with dilemmas of doing-relating. Being issues will predominate in the trust and autonomy stages of the first two years, where a first sense of self is achieved; in adolescence with its issues of identity and meaning; in the midlife meaning and spiritual crises as portrayed by Jung, Maslow, and Levinson; and finally in the integrity-despair issues of old age — wherein Erikson (1962) himself places the heart of religiosity.³ Later adult dilemmas of Being might well manifest very differently depending on the degree of earlier narcissistic or self dilemma.

We are left with a debate among contemporary analysts between those like Winnicott and Bion, and their successors Eigen (1986) and Schwartz-Salant (1989), who would see spirituality as a *sui generis* dimension of human experience not to be reduced to early object-relations, and those like Rizzuto (1979) and, in part, Erikson (1962) himself for whom a sense of transcendence is a later transfer from analogously all-encompassing parental imagos. Jung (1938/1960) agreed that these imagos provide the raw materials for a later archetypal imagination, which, however, emerges as an autonomous

³It should be noted that in the present use of Erikson's stages there need be no claim to their complete validity, only that some such developmental frame is needed to understand transpersonal experience.

dimension not to be reduced to its developmental roots. Bion (1970) goes further. Not only is openness to the "formless infinite" an inherent dimension of cognitive development, but early "catastrophe" may falsely fill and block that openness, rather than create it as a form of experience. Rizzuto's demonstrations, in a series of disturbed individuals, of the origin of their God image in their early object relations would be, for Bion, an illustration of a developmental failure. In psychotherapy with such clients, this sense of an all-pervasive catastrophe is allowed to come forward, so that it may finally transmute into its original experiential, essentially mystical, potential.

3. *Self Actualization, Metapathologies, and Life-span Development*

Contemporary transpersonal psychology is in large part a development of Maslow's (1962) descriptions of a potential mid-life "self actualization" — a spontaneous, secular version of the classical mystic path. After some degree of resolution of the conflicts of "ego" and "deficit motivation," Maslow posits a turn toward "higher" Being values — detachment and autonomy, acceptance, compassion, and openness to the moment. This profound shift is generally mediated by "peak experiences," discussed above as an aspect of the presence, Adamic side of the numinous. Jung (1938/1960) had earlier identified a more conflicted version of mid-life actualization, through the unfolding of a self referential "archetypal imagination" in the face of an existential confrontation with the inevitability of death. Levinson's (1978) comparative mid-life histories support Jung more than Maslow on the intense crises that can be involved in these shifts to interiority.

Later, Maslow (1971), followed here by Wilber (1984), identified certain "metapathologies" that could appear with mid-life self actualization, not to be confused with "lower" conflict but including tendencies to grandiosity or inflation, false idealization, withdrawal and isolation, and/or despair and emotional aridity. James (1902) had earlier spoken of "theopathies," while Jung (1938/1960) saw the dangers of archetypal imagination as psychotic-like inflation and/or withdrawal and ego fragmentation. What is striking about Maslow's metapathologies is their identity in theme but not outward behavior with the schizoid and narcissistic difficulties described by Winnicott, Khan, Kohut, as well as Fairbairn (1954). In both we find false grandiosity and idealization, an attitude of isolation and detachment, and deep futility. Yet it seems clear that we are dealing with two very different groups of people, functioning at very different developmental levels. Winnicott's and Fairbairn's clients may or may not function with outward adult normalcy, but emotionally they are deeply impaired and generally unable to undertake the commitment of long term meditation practice. Again, they would be poor candidates for LSD therapy, although they may long for such inner transformations. While sharing an inner thematics they

differ from Tart's (1991) portrait of the contemporary spiritual seeker, who has achieved some sense of felt reality and self esteem in early life and now seeks something "more."

Current transpersonal psychologies of spiritual development go further than Maslow and Wilber in the necessary use of psychodynamics to understand the narcissistic problems that can be aggravated by higher states of consciousness. Thus Epstein (1995) stresses that any pursuit of a path of "perfection" must deeply challenge self image and potentially encourage a dissociation of existing "lower" narcissistic difficulties. It is only the full allowing of feelings of futility and emptiness that can transform into a higher formless unity (Epstein, 1998). Engler (1984) has called attention to the ways that western students of meditation can mistake actual "self pathology" for the "enlightenment" being sought — grandiosity for Atman or isolation for the empty self of Buddhism. To a less extreme degree than psychedelic drugs, meditative retreats can in some subjects release panic attacks, depression and suicidality, manic agitation, and more rarely psychotic episodes (Epstein and Lief, 1981). Years earlier, Jungian analysts similarly had to pull back from Jung's own over-optimism that childhood dynamics could be left behind by those ready for mystical states of consciousness. Fordham (1958) came to advocate a systematic alternation between Jung's "active imagination" techniques and psychodynamics to deal with the early object-relations issues that also inevitably emerge.⁴ We will return later to Almaas (1988) who goes furthest in synthesizing meditative practice and contemporary psychoanalysis.

If, with the above therapeutic traditions, our self referential consciousness emerges out of an early internalization of the mother–infant mirroring dyad, then later absorption in the consciousness-as-such of mystical states must evoke the themes of early mirroring/holding, not because presence–openness states are developmental regressions, but because this is the inner structure of consciousness. In fact, this early mother–infant matrix seems directly externalized in the act of meditation itself, where an observational attitude of calm acceptance both releases and "holds" the spontaneous effluences of transpersonal states in much the way that Kohut and Winnicott picture the mothering one mirroring and containing the spontaneity of the infant. To the extent that the meditative attitude periodically cannot "hold" the intensity of what it releases, which is inevitable at certain stages of the mystic path, then we have "metapathologies" — analogous at a higher developmental level to the dimensions of psychoticism. To the extent, however, that

⁴In contemporary Jungian analysis there is a dispute between the London Fordham group, who interpret the realization of Self as a re-experiencing in adulthood of the primal, undifferentiated self of the infant, and Schwartz–Salant (1989) who accuses Fordham of reductionism and who insists on the use and separateness of *both* a transference model of early object-relations and a view of an autonomous or archetypal imagination as *sui generis*.

there have been early deficits/traumas in sense of self and self esteem, then meditative and spontaneous self actualization will exacerbate these vulnerabilities in a more overtly schizoid and narcissistic fashion.

We can now attempt a provisional approach to the question of how numinous experiences would be felt as healing and transformative — as something beyond an “abreactive release” which, after all, need not be felt as “sacred” or “redemptive.” A key comes from the common conclusion of Boisen, Bowers, and Starbuck that numinous experience, whatever else it involves, unblocks and/or accelerates normal life-span development — especially in the identity and relatedness issues of early and mid-adulthood. Only a developmental perspective makes sense of why mystical experiences can be felt to be both a “growth” and a “healing,” of why we so often find phrases like “becoming who I truly am,” “who I was intended to be,” and “who I have been all along.”

Erikson, Erikson, and Rivnick (1986) link the spiritual path and the integration–despair crisis of old age in a way that adds an aspect of “precocity” to adolescent and mid-life spiritual experience. The “vitality involved disinvolvement” and potential for “wisdom” in old age come from an acceptance of the despair also inherent in the near completion of one’s life. At its best, a detachment, equanimity, and compassion can emerge, which for Erikson reflects the core of spirituality. In *Young Man Luther* (1962) Erikson says that those who become religious–mystical virtuosos earlier in life engage this same integrity–despair crisis precociously. This turns the adolescent issue of personal identity into one of general existential or human identity, and also retrospectively transforms residues of the trust dilemma of infancy into a more abstract dimension of “faith.” In Erikson’s terms spirituality casts forward toward a view of the totality, value, and meaning of individual life. The religious virtuoso is thus “old” in youth and spontaneously “young” in old age. Jung’s (1961) own imaginary identity as “old man” while a child and his mid-life fascination with the image of the “old wise man” can be taken as an illustration, as can Erikson’s (1969) accounts of the childhood behavior of Kierkegaard and Gandhi. Erikson here pictures spirituality as a *sui generis* dimension based on the synthesis of life meanings and values. Bernadette Roberts (1993) notes that the only understanding she received during her painful “dark night” period of post-unitive “loss of self” was from an elderly friend who told her she was “too young” for such a dissolution of self image.

Numinous experiences may “heal” because they finish a process of growth, potential from young adulthood on, that has to do with letting go of the fixedness of ordinary self identity, a capacity for genuine empathy and compassion, and an acceptance of the multiplicity of perspectives that follows from a sensed common unity in all situations. The view that intense numinous experience could lead to a kind of “growing up” and “integration” in the sphere of character is intriguingly analogous to nineteenth century psychia-

try's contrasting view of schizophrenia as a "dementia praecox" — a precocious old age in which despair and fragmentation predominate.

Some Methodological Issues

Initially, it would seem that methodologies for the empirical study of mystical and conversion experiences would more or less coincide with those for research on other alterations of consciousness, especially since out-of-body experience, lucid dreaming, synesthesias, and hallucinatory phenomena can all occur at the "access" levels of the mystic path (Underhill, 1911; Whiteman, 1961). Lukoff (1988b) offers an annotated review of the range of approaches to mystical experience, while research on meditation, as the formalized setting that leads most reliably to these experiences (Shapiro, 1983), is also relevant. Most "altered state" research, involves the correlation of predisposing or causal factors (personality, cognitive, physiological) with content analysis measures based on verbal protocols (Hunt and Chefurka, 1976; Osis, Bokert, and Carlson, 1973) or with questionnaires formalized from earlier, interview-based studies. Such questionnaires range from those covering the general range of altered states, such as those developed by Shor (1960), Aas and Lauer (1962), and Pekala (1991), to questionnaires specifically directed at mystical experience, Hood's (1975) "Mystical Experiences Scale" being the most widely utilized. There are also several attitudinal measures of the valuative and personal transformations of transpersonal experience, reviewed by MacDonald, Le Clair, Holland, Alter, and Friedman (1995).

The primacy of the descriptive phenomenology and content analysis of reported experiences for empirical study in this area seems inescapable, whether these experiences are considered as the dependent variable of multiple, predisposing factors or the independent variable for personal transformations, or both. This will challenge the methodological assumptions of many "behavioral scientists." Even the hope that a primary phenomenology can be adequately operationalized in more easily administered questionnaires can be questioned. The potentially greater susceptibility of questionnaires to problems of implicit suggestion and demand characteristics when compared to face to face interviews may actually make content analysed interviews the more objective method (Morrison and Hunt, 1996). With Maslow (1962), empirical science must be dictated by the nature and mode of accessibility of the phenomena being studied. Lock-step assumptions about method primarily serve to rule out meaningful study of the more inwardly significant aspects of our lives.

The study of mystical and conversion experience raises methodological issues beyond those inherent to states of consciousness research generally because it must include claims of radical transformation in personality, relat-

edness, and insight. A further complication comes from the potentially transitory nature of those transformations, attested by the "backsliding" common in religious conversion (Starbuck, 1899). The subtlety of the impact of states of consciousness is also seen in the way that certain dreams (Kuiken and Smith, 1991; Spadafora and Hunt, 1990) or peak experiences (Hunt, Gervais, Shearing-Johns, and Travis, 1992) may be recalled years later, even from early childhood, as unusually "impactful." In one sense such experiences are surely "life changing" in that they are brought repeatedly to mind over the years, yet any more definite effects, however sincerely claimed, may be inaccessible to measurement studies.

The study of the claims of more radical personal transformation entails all the problems that characterize research on the effectiveness of psychotherapy, with base rate measures and control groups, if anything, harder to achieve. Even in research on meditation, more easily controlled than spontaneous mystical experience, only Alexander's group (1990) has attempted appropriately controlled long term longitudinal research on the higher stages of experience. In the research studies on transpersonal attitudes reviewed by MacDonald et al. (1995), it is impossible to distinguish between personal predispositions favoring spontaneous mystical experience and the heightening of these same dispositions following such experience. The line between state and trait aspects of transpersonal realization is inherently blurred. Of the questionnaire measures of such experiences, only Van Quekelberghe, Altstotter-Geich, and Hertweck (1991) seem to have included a subscale of self-ascribed long term effects of the experiential states assessed on the other subscales.

Even allowing for these limitations, normative measurement methods may not be finally appropriate to the teleologies and personal transformations that are part of the phenomenology of mystical and conversion experience. Numinous experiences are generally felt to pertain to the ultimate valuative significance and purpose of a person's life. In addition, any resulting manifestations of detachment, wisdom, and compassion may well differ depending on their appearance in adolescence, mid-life, or old age and on whether such transformations of self are more or less continuous from that point, or more variable. Accordingly, the method of choice for these issues would be the comparative life history methodology developed by Murray (1938) and White (1975), and applied to crises of meaning in adolescence by Keniston (1966) and in mid-life by Levinson (1978). A beginning in the use of the life history approach to transpersonal development is certainly found in Erikson's portraits of Luther and Gandhi, but these do not involve the interweaving of actual interview and personality measures developed by Murray and White and they do not cover the spontaneous shift to mysticism located by Jung and Maslow. It is perhaps the major failing of Maslow and the transpersonalists that, caught more by standard research assumptions than they realized,

they have not offered such comparative “lives in progress” of contemporary “self actualizing” subjects.

What we find instead are scattered partial approximations to what needs to be combined into such an approach. Thus, there are Brown and Engler's (1980) unique Rorschach and psychophysiological findings with a small group of meditation masters, and several studies by transpersonal therapists of the ambiguous line between spirituality and psychosis in selected cases (Chinen, Jue, Lukoff, Spielvogel, and Foote, 1988; Waldman, 1992). Hunt (1998) presented an analysis of Heidegger's infamous Nazi episode as “metapathology” by combining transpersonal and object-relations perspectives. Of course we must add, as the very core of the Murray/White life history methodology, invaluable autobiographical accounts of the contemporary mystic path, beginning with Jung's (1961) *Memories, Dreams, Reflections* and including books such as Whiteman's (1961) *The Mystical Life*, Merrill-Wolff's (1973) *Pathways Through to Space*, Roberts' (1993) *The Experience of No-Self*, and Almaas' (1995) *Luminous Night's Journey*. It will be in the combination of such methods, focused on individual lives and respecting the requirements of the life history approach (Runyan, 1982), that we will begin to approach some degree of “ecological validity” for numinous experience and its impact.

Cognitive, Physiological, Socio-Cultural, and Personality Perspectives: A Continuum of Predisposing Factors

1. A Cognitive–Developmental Framework

To return to levels more nomothetic than idiographic, in Otto's numinous we have a form of experiencing which is at the core of human religiosity, yet variously interpreted as the fulfillment of human cognition in the phenomenologies of James, Otto, and Heidegger, or as its collapse and disintegration in epileptoid discharge in the research of Persinger (1987). A mode of experience consisting in awe, fascination, and wonder at a sensed “wholly other” would seem, on the most general level, to be an intensification of the organismic “novelty” or “curiosity” response — the orientation response. The numinous is inherently unexpected and “beyond,” and when schematized, with appropriate paradoxicality, it can only be “said” through the categories of metaphysics, mythology, and theology. A key question then becomes whether such categories are superimposed over a noncognitive state of affective discharge, as its attempted containment and buffer (Persinger), or whether the immediate states are *in themselves* actually noetic (James).

The author has argued elsewhere (Hunt, 1984, 1985, 1995a, 1995b) for a noetic–cognitive basis as the more inclusive view, based on (1) the heightened self awareness in transpersonal states, consistent with Mead (1934) on our symbolic capacity to “take the role of the other,” (2) the prominence of

abstract-geometric imagery in such states, consistent with Arnheim (1969) and Lakoff (1987) on the role of geometric imagery in abstract thought, and (3) the ubiquity of synesthesias, consistent with Geschwind (1965) on the basis of all symbolization in the cross-modal translation of the senses. Synesthesias and geometric imageries are especially obvious at the lower or "access" levels of transpersonal experience, as in the touch-vision fusions and felt meanings of Laski's quasi-physical sensations of ecstasy, the specific cross-modal physiognomies of essential strength, will, compassion etc. as aspects of the numinous for Almaas (1988), Jungian cross-modal mandala patterns in hypnagogic, meditative, and drug states (Fischer, 1975), and in the cross-modal fusions of body image segments, colors, geometric shapes, sounds, and emotions in meditative chakra experiences (Govinda, 1960). For Lakoff (1987), metaphoric "image schemas" like container-contained, up-down, etc. are necessary not only for self awareness of emotion but for human emotional experience itself — as in "he blew his stack" for anger. I would go further, in that in ecstatic states it is these same schemas that are experienced as pure forms (e.g., the rising energy of kundalini), no longer subordinated to the representation of specific situations.

Even the more formless experiences of light in more developed mystical experience can be seen as entailing such metaphor, in that it would be the visual qualities of open luminosity or shining darkness that provide the symbolic vehicle evoking their felt sense of oneness and totality. The cross-modal synesthesia necessary for the "felt meaning" of such experiences would involve a translation of the ordinary, tactile-kinesthetic body image into the openness of light, thereby making sense of the common descriptions of dissolution or "dying" as part of such abstract realizations.

From this cognitive perspective, mystical and conversion experiences are indeed inherently noetic. Wilber (1984, 1995) and Alexander et al. (1990), however, have gone further in maintaining that the mystic path, and its formalization in long term meditation, involves an emergent intelligence beyond the reversibility and novelty of Piaget's abstract formal operations. Such a "post formal" capacity would first be manifested in adult developments in feeling and intuition, related to Maslow's self actualization, and grow into a capacity to witness on-going consciousness as such, independent from the cognitive functions it normally subserves. I have suggested instead (Hunt, 1995b), as a more parsimonious model and one more consistent with the potential development of witness meditation from early adolescence, that spiritual realization involves the rare achievement of *formal* operations within what Piaget termed the "affective schemata." This is the line of development, very similar to Langer (1972) on presentational-aesthetic intelligence, that for Piaget is centered on energetics, value, and feeling. He concluded that affective schemata could not reach formal operations because

they lack the fixed point of accommodation provided by physical reality for the “intellectual schemata” (Piaget, 1962). On the contrary, the sustained concentration of meditation can be postulated as creating just such an unwavering point to which released subjective states must gradually accommodate. Also, we can see how an approximation to such accommodation could emerge from the identity and existential crises of adolescence and mid-life. These would detach the person from ordinary social participation while leaving him/her focused on basic life issues and in a state of high arousal and crisis. The proximity to death in old age could have much the same effect.

Starbuck (1899) was led to a similar model of adolescent conversion experience as an accelerated maturation or a process of “unselfing,” not possible until adolescence and usually not completed until mid-life and beyond. Similar to Sullivan (1953) on the development of empathy, the capacity for “taking the role of the other” would remain more concrete and fixated by anxiety for most people. For Starbuck, conversion experience can lead to “the formation of a new ego, a fresh point of reference for mental states The individual learns to transfer himself from a centre of self-activity into an organ of revelation of universal being, and to live a life of affection for and oneness with the larger life outside” (1899, pp. 130, 147). Since this process is part of an intensification of the “storm and stress” of normal adolescence, it cannot be “post-formal” in Wilber’s sense, but seems better interpreted as a genuinely “formal” intelligence of feeling and value, quite rare in its fullest form. Starbuck offers a precursor to Erikson’s “identity crisis,” which Erikson (1962) similarly saw as the point of departure for *homo religiosus*, whatever its earlier childhood precocities.

2. *The Psychophysiology of the Transpersonal*

The major challenge to a cognitive–developmental account comes from the intensity of some of the changes in physiology that accompany numinous experience. The question inevitably arises whether it is an emergent cognition or a more reductive physiology that is “causal,” or, if the two are inextricably linked, as seems most likely, whether one perspective explains that linkage more inclusively than the other. Roland Fischer (1975), extending earlier work by West (1962), Venables (1963), and Silverman (1967), showed how mystical, creative–visionary, and psychotic experience occur at the extremes of physiological arousal. These states occur in settings of either very high or very low, central or autonomic arousal, verging on loss of consciousness and linked by what Fischer terms “arousal rebound.”

There is considerable evidence of unusually low and high arousal levels in both advanced meditation and the schizophrenias, with rapid equilibrating shifts between levels in each. The expanded sense of awareness in meditation is associated with levels of oxygen consumption, heart rate, and blood lactate levels more

typical of deep sleep, reflecting a parasympathetic autonomic dominance (Alexander et al., 1990). Meanwhile, prototypical meditation EEG's show predominant alpha and theta rhythms, unusually sustained in time and across both hemispheres (Alexander et al., 1990; Woolfolk, 1975). Some "insight" or "mindfulness" techniques extend these theta records, with concomitant self awareness, into both deep sleep and the REM state (Alexander et al., 1990). Persinger (1987) regards these EEG changes as subthreshold epileptoid manifestations, and certainly ecstatic and kundalini states are associated with intense autonomic and cortical activations (Woolfolk, 1975). Correspondingly, chronic withdrawn schizophrenics can show high physiological activation (Venables, 1963), while the paroxysmal autonomic crisis in catatonic excitement is obvious. At the same time, the EEG in early onset schizophrenia can show lower arousal alpha rhythms, and Whitton, Moldofsky, and Lue (1978) found enhanced theta during ongoing hallucinatory episodes in schizophrenic patients and during "creative insights" in normal subjects. This lower cortical arousal in early schizophrenia may stem from an arousal rebound from the ongoing sleeplessness and exhaustion of acute psychotic onset (Landis, 1964).

For Fischer (1975) very low or very high arousal would be associated with right hemisphere enhancement, since in both cases the typical predominance of the left hemisphere is reduced — both by the greater left hemisphere impact of alpha and theta rhythms and a ceiling effect on both hemispheres in high arousal. In addition to claims of right hemisphere enhancement in meditation and other altered states (Earle, 1981) and greater inter-hemispheric balance in both meditation and chronic schizophrenia (Fischer, 1975), this is also consistent with right hemisphere predominance for attention and immediate consciousness (Mesulam and Geschwind, 1978) and for body image — as the core of personal identity (Bisiach, Rusconi, and Vallar, 1991). Fischer concluded that it is typically the right hemisphere that synthesizes the impact of subcortical and autonomic arousal, giving rise to the felt meanings and sense of portent in numinous experience. Fischer's model thus includes a cognitive view of transpersonal experience as a nondiscursive, spatially based intelligence of metaphoric self awareness.

The controversy would come over whether the physiology of organismic crisis in mysticism and conversion creates these powerful felt meanings or whether that is the inevitable bodily aspect of something more primarily existential and valuative. Certainly a hyper-arousal "emergency" response, with signs of simultaneous or "paradoxical" sympathetic and parasympathetic discharge, is a key feature of many transpersonal states. It seems to be the same "death-rebirth" crisis interpreted by Grof, in his LSD and holotropic hyperventilation research, as a revival of the birth trauma. Knox (1950) describes the identical syndrome as the "pangs of the new birth" in evangelical enthusiasm:

There is a cry, or a roar . . . even as the agonies of death The afflicted person drops to the ground They would sigh, groan, and bawl . . . [sometimes] with sharp bodily pain They made the strongest contortions, and wrung their hands with violence. A cold sweat overspread their faces They breathed with difficulty and their whole body was convulsed . . . and then lay as one dead. (pp. 389, 520–522, 530)

Shamanic practices such as the ritual sweat bath and sun dance directly induce this autonomic crisis (Winkelman, 2000), as does the isolation, physical exhaustion, and confusion and anxiety of “brain washing” and “programming” techniques (Spilka, Hood, and Gorsuch, 1985). Mystical practices of “mortification” entail broadly the same features (Underhill, 1911).

Contra Grof’s view, however, this effect seems more parsimoniously taken not as “trauma of birth” but as a more general organismic “emergency” pattern, often leading to “tonic immobility” or trance-like paralysis in humans and animals. Preyed-upon creatures will first show convulsive agitation, hyper-ventilation, and accelerated heartbeat, which, where escape is not possible, ends as a tonic paralysis state — with heavy salivation and lowered arousal as signs of paroxysmal parasympathetic rebound and a waxy or catatonic flexibility based on the simultaneous tensing of both flexor and extensor muscles (Gallup, 1974). This reaction is both the first stage of physiological shock and it is functional in that motionlessness often prevents further injury by predators. It is based on the extreme intensification of the orientation response to novelty (Gallup, 1974). The same mix of features is found in catatonic schizophrenia (DeJong, 1945) and in the deeper phases of yogic concentration (Bernard, 1950).

While this still leaves us with the question of why such a basic response pattern would re-emerge at the core of human religion, it provides the fuller organismic context for Grof’s “peri-natal matrices” as the doorway to higher transpersonal experience. Rank’s (1924) own list of clinical signs of “birth trauma” included disturbances in breathing, convulsions, trembling, rocking or stereotypical positions, paralysis, and catatonic stupor. These also fit better with the broader pattern. In fact, the mix of sympathetic and parasympathetic in tonic immobility makes more sense of some of the “peri-natal” features over which Grof himself expresses puzzlement — sensations of heat and bizarre sexual impulses. This is not to deny that specifically traumatic births might leave residues that could re-appear as later features of the individual anxiety response (Greenacre, 1952) or in altered states of consciousness (Wade, 1996), but it does make tonic immobility and autonomic rebound the more generic category, and one not necessarily intrinsic to the normal birth process.

The more general question, however, is still whether it is the felt meaning features of the numinous that subsume Fischer’s arousal continuum and tonic immobility or whether such noetics become instead an epiphenomenon of hyper-arousal and/or epileptoid phenomena. A similarly reductive or “brain-washing” model of religious conversion was proposed by Sargant (1959),

based on Pavlov's accounts of a "protective inhibition" in his dogs when exposed to especially stressful or exhausting conditioning. They showed various phases of tonic immobility, as well as loss of previous conditioning and/or its "paradoxical" and "ultra paradoxical" reorganizations. Sargant suggests that such stress-driven reconfigurations of prior learning are the common basis for religious conversion, brainwashing, shock treatments, and therapeutic abreaction using narcosynthesis.

It does seem that the felt meaning and physiological sides of numinous experience are inseparable. At the same time, the form of tonic immobility in both religious and catatonic states has been transformed by, and so subsumed to, our cognitive-symbolic capacity. The abstract cognitive features of mystical experiences seem unmistakable. Reviewing the complex findings of EEG and autonomic changes in deep meditation, Schumann (1980) points out that none of these physiological effects is sufficient by itself to produce a mystical or deep meditation experience, but must also involve a concomitant cognitively-based direction of attention to ongoing consciousness. Scarry (1985) has even suggested a cognitive basis for the impact of physical pain in torture, brain-washing, and religious mortification, in that intense pain, by ultimately emphasizing the body above all other values and loyalties, is "world-destroying" — undoing and cancelling all the outer identifications that make up the ordinary sense of self.

It would be our emergently human crises of meaning that more primarily determine the physiology of arousal in numinous experience. Erikson sees such crises as intrinsic to the major developmental stages of personhood, ending in the maximum synthesis possible for the stresses inherent to each era. It would be our self referential mind, turned around on but unable to "fill" the categories of self, other, time, and consciousness, that would entail periodic meaning dilemmas — with autonomic crisis as the potential by-product precisely because these issues are open-ended and only relatively solvable. Ordinarily, these physical crisis states are embedded between their symbolic gestations and resolutions. It is our capacity for both selectively exaggerating (shamanism, psychedelic drugs) and perverting (brainwashing) this process that can, on occasion, artificially separate the autonomic crisis from the noetics that are its usual context. It is easy to forget that it is our intelligence that creates and manipulates in experimental animals, and sometimes human victims, what are otherwise natural elements of the long term, gradually gestating developments of mysticism, religious conversion, and more sadly, psychosis.

3. *The Sociology of Max Weber and its Application to Mystical and Conversion Experience*

Given our social-symbolic nature, the individual phenomenology of the numinous and its extension into conduct must also intersect with and be influ-

enced by more collective crises of meaning, Max Weber (1922) and his follower Ernst Troeltsch (1931) formulated a widely influential theory of the relation between socio-cultural change and what Weber termed the "radical salvation movements" that appear during periods of alienation and secularization. Weber distinguished two forms of such movements, each with its predominant form of numinous experience, impact on society, and socio-economic class of primary or initial appeal. Mystical movements tend to be more centered on the individual's own development of numinous experience for its own sake, pointing toward the non verbal void/cessations of Medieval monasticism and eastern meditation. They tend to originate in the aristocratic and artistic classes, where alienation will be experienced as "interior" and "personal," with a less obvious impact on society. Prophetic or "ascetic" movements, such as early Christianity, Islam, and the Protestant Reformation, center around more overtly emotional conversion and "possession" states — "being filled" with a message of ethical mandate that can have more direct social, even political consequences. Such teachings depict fundamentalist and/or utopian solutions to widely felt social tensions. Propheticism tends to originate among the lower middle classes and oppressed national groups, who are more likely to locate their dissatisfaction in external oppression.

Bourguignon (1973) has located precursors of Weber's types in non literate, native societies, in what she describes as the more individual "vision trance" of single class, shamanic societies vs. the more socially impactful "possession trance" that tends to be found in multi-class societies. The latter make social distinctions on the basis of property, polygamy, and/or slavery, all sources of considerable stress and social resentment. Accordingly, possession trance tends to be socially or publicly enacted, often with convulsive, emotional struggle, and later amnesia — as seen in glossolalia (Goodman, 1972). Possession trances give rise to "messages," direct or indirect, which will at times lower social tensions, alleviate depression and anxiety, and empower the individual (Krippner, 1989; Lambek, 1989). With Boisen (1936), we could say that the prophet's identification with his/her people is so strong that the individual's meaning crisis generates moral insights of general social relevance. Weber gave rise to a continuing controversy with his hypothesis that it was the Protestant Reformation, with its sanctified sense of vocation and success as signs of God's grace, that created the individualized ethics necessary for the development of economic capitalism. Here, the personal transformations associated with conversion experiences would further reinforce our contemporary, increasingly secularized emphasis on individual responsibility and the work ethic.

However, the differences between mystical experience and prophetic action following conversion seem more a continuum than an inherent opposition. This is already implied by our discussion of the ways that the phenomenology of numinous experiences is directly expressed in personal

transformation and charismatic social impact. It is clear, for instance, that mysticism can have major social consequences, as in the spread of Buddhism through Asia based on the travels of "exemplary" itinerant monks. Going further, Weber (1922) divided both mystical and prophetic movements into "inner-worldly" and "other-worldly" forms, with Troeltsch (1931) anticipating an advent of inner-worldly mysticisms in the educated classes of the twentieth century. Inner-worldly mysticisms are illustrated in Gurdjieff's self remembering, Jung's individuation of Self, Almaas on personal essence, and Maslow's self-actualization. The entire post-Nietzschean project for a "science of ecstasy" is itself part of such a shift, since it combines a this-worldly material orientation with the experiential-aesthetic attitude of modernism. The point is that just as capitalism needed the inner-worldly prophetic "ethic of vocation," our society of separate individuals — "autonomous" to the point of isolation and social fragmentation — may not be livable without some renewed access to an experiential sense of presence and "I am." Weber did call attention to what he called the "broken" quality of inner-worldly mysticism. Its experiential openness within everyday social life will also entail an openness to the vulnerabilities in self esteem that Kohut and Winnicott found endemic in our time. Accordingly it may not be possible to separate a meditative path from the psychotherapy needed to make it bearable.

At the same time, the prominence of a non-doctrinal Adamic ecstasy in conversion experience points to a strong experiential, even mystical, element within Evangelicalism and Pentecostalism. The widespread enthusiasm states beginning with John Wesley's eighteenth century revivals provided a dimension of interiority and personal renewal in times of widespread economic hardship and the dislocating social changes of early industrialism (Sargent, 1959). Even the amnesia of glossolalia and other prophetic "charismatic gifts" can be preceded by self validating and "healing" experiences of power and joy (Goodman, 1972). Harold Bloom (1992) has suggested that within this mystical element in Protestantism there is a specifically Gnostic dimension, as in the Adamic ecstasies and related utopias of Joseph Smith, Mary Baker Eddy, the early Shakers, Southern Baptists, and Seventh Day Adventists. Their treatment of redemption indirectly implies a return to the pre-fall Adam or *Anthropos* and a tacit elevation of the born-again to the level of the divine, also characteristic of the heresies of medieval mysticism and the earlier neo-Platonic mystics and Gnostics. From this perspective, much contemporary religiosity has a defining mystical element and aspiration, even when it appears outwardly prophetic.

4. *Absorption/Psychoticism: A Bi-valent Dimension of Personality*

The dimension of personality predisposing to mystical and conversion experiences is the same as that for transformations of consciousness generally,

and has been variously defined in questionnaire studies as absorption (Tellegen and Atkinson, 1974), imaginative involvement (Hilgard, 1974), openness to experience (McCrae, 1993–94), and fantasy proneness in childhood (Lynn and Rhue, 1988). Tellegen and Atkinson define absorption as the predominance of an experiential attitude over an instrumental one. It is associated with proclivity to expanded awareness and altered states of consciousness, the tendency to become highly absorbed in imagination, nature, and/or creative activity, vividly imagistic and synesthetic experience, and a general sensitivity and responsiveness. It has been correlated with hypnotizability and spontaneous altered states (Roche and McConkey, 1990; Tellegen and Atkinson, 1974), mystical experience (Alexander et al., 1990; Hood, 1975; Hunt and Popham, 1987), synesthesia (Rader and Tellegen, 1981), and out-of-body experience (Irwin, 1985). The somewhat more broadly conceived “openness to experience” has been related to absorption itself, intuitiveness, aesthetic interests, and spontaneous altered state experience (McCrae, 1993–94), as well as to a transpersonal or mystical self-concept (MacDonald, Tsagarakis, and Holland, 1994). Women tend to show higher scores on all or most of these measures. This absorption/openness dimension is also consistent with earlier more observational approaches: Maslow (1962) described his being-cognition as including a “fascination and complete absorption,” while James (1902) cited an early study by Coe showing that subjects reporting sudden conversion experience were highly hypnotizable and had vivid hypnagogic imagery and dreams.

Consistent with the above discussion of mystical and psychotic experience as competing organizations of overlapping transformations of consciousness, the personality dimension of absorption/openness also comes in two forms — one more synthesizing and “holistic,” the other traumatized and “dissociative” (Roche and McConkey, 1990). In addition then to its transpersonal associations, openness to experience has been found to be related to questionnaire measures of schizotypicality and narcissism (Costa and McCrae, 1995; Widiger and Trull, 1992) — thereby linking it to research on psychoticism. Lynn and Rhue (1988) found MMPI schizophrenia and paranoid subscales at a level of “maladjustment” in about one third of adult subjects who scored high in fantasy proneness. They found two childhood pathways to fantasy proneness: the first group, with the highest MMPI scores, reported childhood loneliness and/or traumatic abuse, using vivid fantasy as an escape, while the second described parental encouragement of imaginative activity, reading, and art. We get a picture here, similar to Bergman and Escalona (1949) on “unusual sensitivities” in young children, of a predisposition to imaginative absorption that, crossed by trauma, is more likely to lead to dissociative vulnerabilities later in life, while in the absence of major developmental problems it can be utilized as openness to transpersonal experience.

Analogous studies by Spanos and Moretti (1988) and Stifler, Greer, Sneck, and Dovenmuehle (1993) support this division. In the first, subjects with high questionnaire levels of "mystical" and "diabolical" experiences were both high on absorption, but only the latter were also significantly high on neuroticism. In the second, groups of experienced meditators and hospitalized, deluded psychotics both showed high levels on the Hood questionnaire of mystical experiences, with only the psychotics having elevated questionnaire narcissism when compared to meditators and controls.

There is a consistency between these findings with absorption/openness and an older research literature linking creativity and psychoticism as two expressions of a common personality dimension. In a series of studies, Barron (1969) found that groups of creative artists and architects, who were also prone to mystical and altered states of consciousness, produced MMPI profiles similar to hospitalized schizophrenic patients, from whom, of course, they also differed markedly in social competence and measures of "ego strength." Claridge (1987) and Eysenck (1995) posit a single bi-valent dimension of creativity-psychoticism. Unfortunately, Eysenck (1995) separates self-actualization/peak experience, as low in psychoticism and high in ego strength, from creativity/psychoticism, missing the fact that proneness to altered states of consciousness, which he makes criterial for the latter, also helps define the former.⁵ Claridge (1987) found that subjects high on psychoticism and normal subjects under the influence of LSD showed an inversion of the normal relation between arousal and perceptual discrimination, becoming more sensitive at either very low or very high arousal. It is interesting to note that this might make high absorbers in general especially sensitive at the high and low arousal windows that Fischer (1975) shows predispose to altered states.

In view of our above discussion of body image anomalies in schizophrenia and LSD "bad trips," it is interesting to find evidence that the distinction between integrative and dissociative absorption/psychoticism is partly mediated by individual differences in physical balance and visual-spatial skills. On the one hand, adult and child schizophrenics (Angyal and Blackman,

⁵Eysenck (1995) defines psychoticism as a general dimension combining schizophrenia, psychopathy, and bipolar disorder. Supported by Chapman et al.'s (1994) finding that high levels of college age schizophrenic-like experiences predicted both schizophrenia and mood disorder ten years later, Eysenck (1995) calls attention to the empirical overlap in these diagnoses. Eysenck (1995) has long proposed a three factor model of personality, based on introversion, neuroticism, and creativity/psychoticism. Psychoticism is so broadly defined, however, that it has proven difficult to differentiate it statistically from his neuroticism factor. Costa and McCrae (1995) have proposed a five factor model whose major distinction from Eysenck is in their separation of his psychoticism into bipolar dimensions of agreeableness, conscientiousness, and openness, with the latter a broader version of Tellegen's absorption and the only aspect of Eysenck's psychoticism that is directly relevant to transformations of consciousness.

1940; Ornitz and Ritvo, 1968; Pollack and Krieger, 1958) can show significant decrement in vestibular reactivity. Schilder (1942) had earlier suggested vestibular dysfunction and related visual-spatial deficits as a background factor in psychotic and neurological hallucinatory syndromes. More recently, we find studies showing that spontaneous mystical experiencers (Swartz and Seginer, 1981), advanced meditators (Alexander et al., 1990), and out-of-body experiencers (Irwin, 1985) all show superior levels of performance compared to controls in balance and visual-spatial skills. A similar dichotomy exists within dream research, with spatial decrements in nightmare sufferers vs. superior levels in lucid and archetypal dreamers, whose dreams have been compared to waking mystical states (Gackenbach and Bosveld, 1989; Spadafora and Hunt, 1990).

Balance and spatial skills are aspects of the cognitive-affective bases of the body image, and so of a core sense of self (Schilder, 1942). It seems plausible that the body image and related spatial capacities would be a major mediator of integrative vs. disintegrative altered state experience. Where narcissistic and self anxieties are minimal, the re-use of basic spatial patterns as expressive metaphors can lead to felt meaning and expansiveness in higher absorption subjects. Where vulnerabilities in sense of self, and so body image, are paramount, the transformations of consciousness attendant on absorption will be persistently disorienting and so either frightening or avoided.

Finally, this absorption/psychoticism dimension of individual differences can be related back to the socio-cultural predispositions for consciousness transformation. There would be two contrasting ways that social crisis and alienation interact with individual imaginative sensitivity — either to victimize the individual or to allow him/her to become part of a (relatively) culturally sanctioned visionary capacity. Searles (1979), at the end of many years of long term psychotherapy with hospitalized schizophrenic patients, concluded that as children who were especially sensitive to the states of those around them, they had identified with psychotic levels of anxiety in their parents. Such a process of “projective identification” (projection, plus “induction” in the one less powerful) would follow from the intensity of emotional crisis in the parent and its relative dissociation. Thereby these children come to suffer and gradually attempt to resolve these anxieties, with varying degrees of awareness and later memory. For those high in absorption, by development and/or genetics, there would be no choice but to take on an adult psychosis or borderline state as their own. We can generalize this and say that those high on absorption/creativity have no choice but to take on the valuative crises that surround them. If the parents are idiosyncratically psychotic then we end with Bion’s (1970) view of the parental imago assuming a premature deity-like status that blocks a more generic spiritual development. In the absence of psychotic parents, but in the presence of society-wide dilemmas of alienation

and meaningless, the child does what Jung, Gandhi, and Kierkegaard did and assumes a precocious version of the Eriksonian collision between integrity and despair in the culture at large. It would be thus that Jung (1961) could experience himself as an “old man” in childhood and come to conclude as an adult that his work was answering the questions of his ancestors — not to mention the loss of religious faith by his Protestant pastor father.

Potentials and Risks of Transpersonal Development Revisited

1. *The Place of Conflict and Suffering in the Spiritual Path*

A debate has arisen over the nature of transpersonal development. On the one hand, we find the more linear, meditation centered, Vedantist approach of Ken Wilber (1984, 1995), on the other, the more Jungian “regression in service of transcendence” model of Michael Washburn (1988, 1994) — also closely linked to “spiritual emergencies” and psychotic features in mystical experience. For Wilber and his “ladder” model, the major source of error in transpersonal studies rests on what he terms the “pre-trans fallacy.” This is the tendency, common in different ways to both Jungian and Freudian approaches to numinous experience, to confuse “regressive” experiential states that are pre-egoic in origin, i.e., based on cognitive structures from the first two years of life, with those states that emerge trans-ego — out of the “post-formal” intelligence (above) that unfolds as the meditative path. Wilber (1984) identifies specific metapathologies that can occur at his psychic, subtle, and causal levels of transpersonal development, but, in contrast to Washburn, holds that where emotional conflicts related to self pathology obtrude on the mystic path, meditative practice should be replaced by long term psycho-therapy until such blockages are resolved.

For Washburn and his “spiral” model, transpersonal experience emerges from a mid-life “regression” or “u-turn” in order to assimilate the pre-egoic, “dynamic ground” of early childhood. It remains unclear whether for Washburn numinous experience itself is this re-assimilation of the “primal self” from the first two years, as it was for Fordham (1958). This would be a romantic version of the regression model. Or, with this author, Washburn at times seems to see spiritual development as involving early conflicts because it is a return to a line of cognitive-affective intelligence of self-referential imagination typically truncated at some point in childhood, at least in a secular civilization. The views of both Washburn and Wilber fit equally well with observations that western subjects practising eastern meditations can experience intense dynamic dilemmas ostensibly lacking in the original cultures (Engler, 1984). It is just that Washburn sees this as inevitable and Wilber as an occasion to switch to a psychotherapy necessarily regarded as remedial.

What evidence there is on the debate suggests that both paths exist, one predominantly linear and less conflicted, and one of repeated crisis. Thus, when Underhill (1911) sets out her mystic path, from awakening, purgation, and illumination, through dark-night metapathologies to the unitive state, she also says that in persons of "highly strung and mobile type" (p. 394) each of these stages will consist in more rapid oscillations between states of pleasure and states of pain. For these persons awakening is actually in continual interchange with purgation, illumination with dark night. The Wilber-Washburn debate is actually quite reminiscent of the contrasting poles of eighteenth century Christian heresy (Knox, 1950): a more steady, if withdrawn, Quietism and the more fervent agonies of Evangelicalism.

Washburn himself suggests that his approach fits best with western mysticism, yet Thomas, Brewer, Kraus, and Rosen (1993) did not find major "regressive" crises in the majority of two small samples of relatively "realized" older subjects from India and England. Notwithstanding, Rothberg's (1996) interviews with experienced western teachers of eastern meditation techniques found strong agreement that high levels of genuine meditative realization often lead to emotional crises related to unresolved narcissistic and psychodynamic issues. It has apparently proven more difficult than Wilber wishes to acknowledge for many advanced practitioners to tell the difference between "transcendence" and "dissociation." This was also the observation of Fordham (1963) about LSD psychotherapy. Meanwhile, not only do accounts of contemporary meditation retreats emphasize the emotional conflicts and childhood traumas abreacted, but we should also note the sheer amount of physical pain and distress involved at times in such long motionless sitting (Kornfield, 1979; Walsh, 1977). It may well be that the more explicit physical purgations and mortifications of the classical western mystics are actually well matched on a long term basis by their eastern counterparts. Certainly, Freud (1926) posited a common basis or quality between physical and emotional pain, and Scarry (1985) vividly describes how physical pain subduces all sense of self identity.

In the modern west, and despite the best corrective efforts of Jung, Erikson, and existential psychiatry, our "iconography" of emotional suffering still tends to come from clinical diagnostics and the widespread view of the childhood origins of these attempts to formalize human misery, excess, and depletion. "Regression" to childhood conflicts on the transpersonal path, while surely a dimension of individual difference, may also tell us as much about how purgation, dark night, and *dukkha* (suffering) are being "schematized" in the modern west, as about the theories of spiritual development ostensibly being debated. Suffering that might once have been given a directly spiritual interpretation in terms of sin or demonic temptation is today understood in terms of its first thematic manifestations in childhood.

This is true experientially whether we finally conclude that we are dealing with the objective causes of later conflict or merely its earliest emotional manifestations.

Accordingly, it would be A.H. Almaas (1988) and his "diamond-heart" perspective that most successfully mediates between regressive vs. progressive approaches to transpersonal or "essential" realization. For Almaas, the experience of presence–openness and the vulnerabilities of Kohut's self pathology are two faces of the same dimension. Step by step work on "lower" conflicts is understood as potentially transmuting into experiences of expansion in different aspects of essence — strength, compassion, will, joy, etc. For this to occur, emerging feelings of dread, rage, and despair must be fully felt and accepted as sensed deficiencies in sense of self. With sustained awareness these painful felt deficits come to be experienced as sensations of emptiness, often as sensed "holes" in the body image — an idea consistent with Reich's bioenergetics and Gendlin (1978) on bodily locations for felt meanings, and Angyal (above) on somatic hallucinations. For Almaas, because presence–openness is only fully expressed via the experience of space and light, while the ordinary body image rests on defensive contractions, the move from suffering toward release entails a middle stage in which emotional anguish is sensed as "holes," cavities, or openings within the body. Once fully in awareness and no longer resisted, these deficiencies open into direct experiences of Being. Almaas' descriptions are consistent with Laski (1961) on desolation experiences of lack and limitation transforming into the felt gains of ecstasy, this whole sequence mediated by her quasi-physical sensations. Almaas argues that if the impacted feelings blocking essence are not fully experienced and accepted before experiences of realization, these same conflicts will close in afterwards — much as described by Rothberg (1996).

Support for Almaas' linkage of aspects of the numinous with dynamic traumas/deficits comes from research on emotion. Solomon and Corbit (1974) proposed an "opponent process" theory of the tendency of the organism to approach hedonic neutrality after either intense positive or negative affective states. This long-term tendency toward equilibrium of affect operates by the automatic elicitation of the affective state that is the opposite of an intense preceding state. For instance, in both addictive and love relationships the initial state is markedly, intensely positive, which then is gradually replaced by a more neutral-negative background state, as mediated by the compensating negative processes that appear as such with withdrawal and loss. With thrill-seeking behaviours like skydiving, the initial terror is followed by powerful feelings of joy and release on survival. This model has been extended by research on the felt negative aftermaths of very positive emotion (Diener, Colvin, Pavot, and Allman, 1991). To the extent that spiritual realization experience includes sudden and intense affect, the applica-

tion of the opponent process model seems clear. If painful emotional issues thematically bound up with realization are dealt with first and explicitly, as in Almas's methods, and indeed in the classical pattern of prayer, then not only will those negative emotions not close in after initial bliss, but the initial suffering itself becomes part of a directional rebound toward a positive expansiveness. It may not be for nothing that in Underhill's schema purgation precedes illumination, and the dark night precedes the unitive state, while panicked "spiritual emergencies" following initial bliss characterize many accounts of acute psychotic onset. Even if Wilber's model were the most applicable for a given person, it would seem safest as a general practice to first explore the sources of conflict and self-deficit most commonly activated by experiences of higher realization. At worst, there would be a brief delay in advancing on Wilber's ladder, with only the slightest of rebounds for those few without emotional blocks. At best, however, a specific directional rebound from otherwise dissociated or unrecognized pain could be the key to transpersonal openings less likely to end in metapathological distortions.

2. *Openness vs. Stasis: Overly Schematized Transpersonal Experience as Ontological Defense*

James Joyce, in *A Portrait of the Artist as a Young Man* (1916), describes what he had earlier termed "epiphanies" or "sudden spiritual manifestations," in the midst of everyday life and art, as states of "arrest" or "esthetic stasis." In these experiences there is a "fascination" with:

the luminous silent stasis of esthetic pleasure, a spiritual state very like to that cardiac condition which the Italian physiologist Galvani, using a phrase almost as beautiful as Shelley's, called the enchantment of the heart. (p. 213)

We have traced a dynamic dimension of openness–stasis across both transpersonal and psychotic transformations of consciousness, with the more positive movement toward the full openness of the numinous as an ineffability and "not knowing." Transpersonal openness seems to be the very opposite of the stasis and stoppage inherent in both a fixed artistic product and in the characterization of any specific experience as "this is it."

If we consider transpersonal development as a metaphor-based, self-referential intelligence expressing the existential fundamentals of human beings, then we can distinguish between patterns (light, space) that are fully adequate to a realization of the numinous as "wholly other," and more specified and definite patterns whose initial numinosity surely expands ordinary categories of experience, but not enough to avoid being taken as "ends" in themselves — i.e., when taken literally and concretely. We saw above that anything more specific than "light" as a metaphor for the openness of human existence risks becoming a kind of "ontological defense" against that open-

ness and a stoppage of lived time. One must suspect, accordingly, that the more specific transpersonal categories of past lives, astral realms in out-of-body travel, phylogenetic regressions, and "birth trauma" are similarly at risk of remaining as "ends," rather than as "means" toward the ineffable. As attempted schematizations of the numinous these categories are appropriately "far out," but still more familiar and less paradoxical than "shining darkness." Transpersonal experience sets up an inevitable dialectic in which either essence gradually and sometimes painfully assimilates and re-contextualizes ego or the narcissistic defenses of ego re-assimilate essence (Almaas, 1988). The latter would be one dimension of what Otto, Jung, and Weber saw as an inherent tendency to secularization of the numinous.

Mack's (1994) UFO abductions, Monroe's (1985) astral planes, Grof's (1980) past lives and phylogenetic regressions, and fundamentalist visions that purport to describe the specific furnishings in heaven all risk becoming the equivalent of Joyce's "cardiac arrest" rather than opportunities for further opening. To "contain" presence–openness in highly specific metaphors and narrative scenarios turns a dimension potentially opening toward all embracing mystery into a series of fixed, art-like achievements, which must lead more toward gradual habituation than beyond themselves. This necessarily recurring temptation toward concretization and literalism becomes part of the fine line of a modern inner-worldly mysticism that would frame the numinous in terms of this-worldly processes. This dilemma was already caught by Emerson (1912) in his critical evaluation of the similarly over-specified mystical visions of Swedenbourg:

It is dangerous to sculpture these evanessing images of thought. True in transition, they become false if fixed. (p. 65)

Future Directions and Past Verities

This overview of mystical, conversion, and related psychotic experience is replete with the dichotomies that have defined transpersonal and states of consciousness research. One investigates mysticism vs. psychosis, mysticism vs. conversion, vision trance vs. possession trance, transpersonal vs. psychoanalytic, cognition vs. physiology, absorption vs. psychoticism, progression vs. regression, pre vs. trans, and spiral vs. ladder. Often research and theoretical debate hinge on one or the other of these opposing poles, which have been with us in some form since James and Jung. One conclusion would be that once certain basic points implied in these dimensions have been understood, i.e., that mysticism is not per se psychosis, then most or all of these supposed dichotomies now hurt inquiry more than they help. It seems increasingly

clear, for instance, that mysticism can have psychotic features and vice versa without thereby being identical; that a cognitive-affective account of the abstract imagistic bases of transpersonal experience does not rule out a physiology of arousal; that adult developmental features of mystical experiences do not prevent them from embodying the thematics of early childhood experience; and that "positive" and "negative" forms of numinous experience meet in a common crisis whose resulting "fruits" can be dynamic or static. The further development of a phenomenologically based human science of radically transformative states of consciousness will depend on a strategy of maximal inclusion and synthesis actually warranted by "the things themselves."

Against more traditional "behavioral science," it has long been important to expand standard methodology to include the observation, phenomenology, and life history approaches that are intrinsic to the empirical study of transpersonal experience, at least if we want a human science that attempts to address the existentials of human life. In turn, many current transpersonal and humanistic psychologists need to acknowledge the importance of empirical discipline and theoretical parsimony if their work is not to turn unwittingly into a crypto-religion. If, in the human sciences, we re-approach the traditional themes of the humanities with the attitudes and methods of the sciences, most broadly considered, then such an intersection/collision will of necessity modify *both* perspectives. Such a holistic, inclusive human science is needed if we are to address the substance of what matters to living human beings. If we decline this potential for an emergent human science because it resists "standard measurement," then, in an era when mainstream science seems to define all that "matters," we are saying that no genuine science of humanity is possible. If we accept, then the maximal point of collision between the sciences and humanities lies where Nietzsche and James said it did — in the mediation of the experiential core of spirituality in terms comprehensible for a material global age.

The twin dangers for such a "science" of "spirituality" were well stated by James (1902). He insisted on the importance of a "radical" empirical study of the felt reality, conditions, and fruits of religious experience, avoiding the twin dangers of false reductionism ("medical materialism") and "over-belief." Within this region of empirical study, so tenuously established, it seems especially important that contemporary researchers preserve both a phenomenological perspective on the nature and teleology of numinous experiences and an equal interest in their predisposing processes — cognitive, physiological, personal, social. Those concentrating on the existential manifestations of the spiritual need to recall that such experience taken "literally" is over-belief and that not all talk of "mediating processes" is reductionistic. Those centering on "process" need to be clear, with James, that no findings with respect to arousal, dopamine, or cross-modal synesthetic metaphor can prove that the

experiences so mediated are, as such, either illusion or truth. That way lies ideology, whether nihilist or religious, not the intersection of experience and process characteristic of the human sciences. Rather, it is the place and nature of numinous experience in mind and behavior to which we might aspire to make a contribution.

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