

REFLECTIONS ON PSYCHOTHERAPY

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This is an impressionistic, retrospective account of the subjective changes resulting from some twenty months of intensive, individual psychotherapy as experienced by the author. In recording these thoughts, no attempt was made to look at transcripts or notes taken during therapy.

During the twenty months in which I experienced psychotherapy, perhaps one of the major constants was surprise. I began therapy largely fortuitously, with the expectation of an interesting, but not especially productive, experience. What I actually received not only exceeded my expectations, but also comprised experiences and changes which had previously been totally unknown to me.

*time
dilation*

One of the first effects was time dilation. Formerly I had gone through life attempting to withdraw attention immediately after any completed act. However, the therapy experience of 'reflection' produced a similar change in awareness outside the therapy situation, and I soon found myself examining my experience more closely. This dramatically increased the amount of my subjective experience such that I felt my life had expanded by a factor of two or three times, as though twice as much was happening in each day . . . a very pleasant experience.

One of the most wondrous discoveries of all was the slowly dawning awareness of the presence of a formerly subliminal, continuously changing stream of inner experience. The range

This paper was written as part of a fuller description of the therapy, which is being prepared by James F. T. Bugental and the author, for subsequent publication in a book.

and richness, Heraclitean and awesome nature of this internal universe, amazed and continues to amaze me. Here was an ever-present, but formerly unsuspected veritable internal universe. After a couple of months I began to perceive more clearly a constant flux of visual images. One of the most exciting of many exciting memories is that of the sudden recognition that these images exquisitely symbolized what I was feeling and experiencing in each moment. Here was a previously unsuspected goldmine of information about myself and the meaning of my experiences. As my sensitivity increased I found that the images accompanied subtle, physical sensations in my body, and that these sensations were the somatic representations of emotion. With this Rosetta stone I was helped to a greater sensitivity of my moment-to-moment emotions. Experiencing this inner world began to become very pleasurable. Whereas initially I had believed that my inner world must of necessity harbor unwholesome collections of monsters, which I had avoided confronting all my life, I now came to think of this inner world as a very attractive, pleasant source of positive information. As this change in perspective occurred, I found myself escaping into mindless activities less often (e.g. listening to the radio) and being more willing to 'hang out' with my experience and my mind.

*stream
of
inner
experience*

As I spent more time tuning into my experience, my perceptual sensitivity increased. The absolute threshold seemed to decrease and discriminative abilities to increase. Initially this change seemed particularly localized to internal percepts, but it gradually became apparent that it also included heightened sensitivity to external stimuli, though subjectively the latter felt like an indirect effect, i.e. an increased sensitivity to the internal reactions secondary to external stimuli—perhaps an example of the adage that we only know ourselves. One unanticipated, but very pleasurable, discovery resulting from this was synesthesia. Subjectively it felt as though this phenomenon of 'cross-modality energy transfer' was always present though usually below threshold levels, and initially, it was only when I was most deeply immersed in and sensitive to my inner experience that I could detect it. However, with time and a generalization of this heightened sensitivity, synesthesia has become a frequent occurrence, recognizable at almost any time when I am relaxed and quiet. Traditionally, synesthesia has been thought of as a rare phenomenon, but this experience raises the question of whether we are not all capable of it, and only need to develop the inner sensitivity to recognize it. As the sensitivity to the inner experiential stream increased, so did its recognized richness until it soon assumed a psychedelic quality which I had previously thought to be only attainable with

*increased
perceptual
sensitivity*

drugs. This was one of many findings which pointed me towards a realization of the importance of the 'here and now'.

*importance
of
self-
acceptance*

As formerly feared and detested aspects of my life were confronted, it gradually dawned that maybe most of them were not so incredibly horrendous after all and that maybe it was okay to be merely human and not judge and punish myself for shortcomings measured against a stern, superego scale. Thus began to emerge into awareness the importance of self-acceptance and the negative effects of constant judging and punishing. This realization and consequent behavioral change was not obtained without considerable anxiety and is still in process. Formerly my belief had been that constant self-monitoring, judging, and harsh goading were essential if I was to motivate myself to desired goals. The internal state was, as my therapist put it so often and so nicely, "a master-slave relationship in which you have to be constantly watching and on guard against yourself." The counterproductive nature of this state of affairs eventually became apparent, and I began to realize that harsh judgments, anger, and disappointment in myself only fueled the negativity that I regretted. The more complete this acceptance the more effective it was in deflating this negativity. If, for example, I became anxious about something and then became angry that I was scared, and then became depressed that here I was again getting angry at being scared, then it became apparent that it was necessary to accept all the layers of this emotional onion and effectively say that it was okay to be depressed, that I'm angry at being scared. As soon as the outer onion ring was accepted, then the inner ones also collapsed with it. Sometime after finishing therapy, a further implication of the importance of acceptance became apparent. As long as there is some part of our selves which cannot be accepted, then its recognition has to be defended against and screened from awareness. The result is simply a reduction in consciousness.

*being
more
"awake"*

As these realizations about acceptance and the consequences for consciousness began to emerge, then some of the Eastern traditions, such as Buddhism and Gurdjieffian psychology, began to assume meaning, especially the concept of attempting to be "awake" (Ouspensky, 1949) or conscious of one's experiential state as often as possible (Goldstein, 1976). At first I had trouble reconciling these ideas with traditional psychiatric knowledge. But gradually I became aware that defenses function by limiting consciousness in order to avoid feared experience. The function of defenses is therefore to keep us asleep. The corollary to this seems to be that change comes most easily when we're awake, aware of our emotional state, and con-

sciously submerged in it. Put another way, it could be said that we only change what we experience, and therefore we can only change that which we are coming out of and experiencing in the here and now. Many times I have found that remembering a problem and thinking about it over and over seemed ineffective, but when I was actually re-experiencing the situation or state of consciousness, then a single question or suggestion from my therapist would often be enough to transform it. This seems to suggest that the changes effected by therapy may be very much state-dependent, and that a state similar to the one in which the original experience occurred may have to be re-experienced for effective change.

Another corollary of being more awake and the related increased sensitivity to inner experience is that much of what is normally subconscious or unconscious may be raised to awareness and that much of what has been regarded from a psychoanalytic tradition as detectable only by indirect means such as parapraxes or free-association may in fact be directly apprehensible. Jung (1964) and at least one of the Indian teachers, Rajneesh (1975), have in fact stated that what is called the unconscious in Freudian psychology actually represents only the repressed consciousness and that the true unconscious resides still further below.

*apprehending
the
unconscious*

There were several changes in affect, in particular a reduction in anxiety and worrying and a concomitant increase in positive emotions. The reduction in anxiety and worrying seemed to occur in a stepwise fashion, being particularly noticeable after periods of several days of euphoria. Initially there was a period in which I perhaps became more aware of my anxiety and its almost continuous nature, and this was followed by episodes of lesser tension which gradually became more frequent. However, the major reductions occurred after three periods of euphoria lasting at least several days, following which anxiety never returned to its previous chronic levels. Concurrently there was a reduction in a large number of behaviors, previously labeled as careful, diligent, hard-working, dutiful, etc., which now seemed superfluous and somewhat obsessive-compulsive, e.g. scanning each page of the newspaper, always carrying everything in my briefcase that might possibly be needed that day, double-checking locks, etc.

*reduction
of
anxiety*

Somewhat later in therapy I began to acquire a new perspective on anxiety and other dysphoric symptoms. Formerly I had thought of them as something that occurred to me, a view that emphasized my passivity. However, I now began to see the functional nature of symptoms and our completely active role

*functions
of
anxiety*

in creating them. The first insight into this occurred in a session in which I began to realize that I could let go of a certain fear, but as I did so a second-order fear arose along the lines of "but if I let go of that fear, then I'll actually do that which I now fear." And even tertiary and quaternary fears and beyond fears could be felt to arise as I began to let go the preceding ones. From this came the awareness of how we actively create symptoms as defenses against doing or experiencing things which we believe would hurt us.

It also gradually became apparent that I feared strong emotions of any type—pleasurable just as much as painful. Indeed, after about the first fifteen or sixteen months it became apparent that most of the inhibitions seemed to be against feeling too good and that what I discovered in my inner experience were not the feared monsters and depravities, but rather barriers to the experience of joy.

My self-image also began to alter. Formerly I had measured my worth in terms of productivity, achievement, and intellect. As it gradually dawned that we are so much more than just our intellect, and as I experienced the possibility of being appreciated for myself and my being, the idea of the 'self' as intrinsically worthwhile and valuable began to emerge.

*transmuting
emotions*

About this time I also began to find that it was possible to transmute emotions, and that something like fear could be changed to excitement by a number of mechanisms. These mechanisms or tools consisted of such processes as reattribution, consciousness-focusing, and breath-control. Consciousness-focusing and breath-control, though widely recognized in the meditational and yogic traditions, do not appear to have been recognized in traditional psychotherapies. There are several meditational and experiential varieties of this process, but experientially the principles seem as follows: awareness is focused on the physical sensation of the affect and slow, deep breathing is commenced. The physical sensations of breathing can then be either focused into the area of affect or the sensations of the affect can be spread out into the sensations of inhalation. This effectively retains the affective arousal but transmutes the nature of the affect from dysphoric to positive. If, however, the consciousness focusing is done during expiration and relaxation, then a different effect seems to occur, namely a collapse of the whole emotion, i.e. a reduction in both its intensity (arousal) and nature. Both these processes may be aided by concomitant visual imagery. Not surprisingly, as these preceding discoveries and processes began 'to take', I found myself experiencing more joy than I'd ever believed possible.

One unexpected but greatly appreciated change was an increase in energy. During one session I became aware how I used fatigue and sleep as a way of withdrawing from people and as an avoidance mechanism. The immediate effect of this recognition was to reduce my sleep needs by about an hour a day. This reduction gradually increased to about two hours as I re-processed my various beliefs and fears about sleep deprivation. As I began reducing my sleep needs, I found myself experiencing anxiety attacks centered around the belief that if I didn't get enough sleep I wouldn't be able to function, would go crazy, wouldn't be able to concentrate, etc., and as I worked through these fears there was a concomitant further reduction in sleep. Similarly, my daytime energy or arousal also increased to a point which felt like chronic intense excitement. This state rapidly got me in touch with my fears and beliefs about too much of a good thing, too much energy, and a feeling of being overwhelmed by it and becoming agitated. There was a strong tendency to interpret this arousal as sexual, i.e. to think that I was sexually turned on when in point of fact the arousal I was experiencing was a general nonspecific one. This arousal was so extreme that for some six months towards the end of therapy I experienced spinal muscle pains due to chronic spinal extensor muscle contraction patterns associated with the unaccustomed extreme, upright posture that the arousal elicited. I suspect that I never completely learned how to optimally manage this additional energy since it frequently felt 'too much', even though there were times when it felt intensely euphoric. During some of the 'too much' phases I was able to reattribute it by focusing my awareness on it and giving self-instructions such as "it's not too much, it's only excitement," or by centering my awareness in it.

*increased
energy*

Another discovery was the incessant reality-distorting nature of the 'internal dialogue' and the trap of believing that this dialogue and accompanying affects and perceptual changes represent reality. Although this recognition began in therapy, it is still expanding and seems to be moving in the direction of the Eastern concept of all-encompassing illusion. This is definitely a process which is far from complete for me; in fact, there are times when I feel that it has barely begun.

An important emerging recognition, initially sparked by reading Maslow (1971), was the remarkable strength and prevalence of the Jonah complex (fear of our own potential and greatness). I had gone into therapy expecting to find internal repressed monsters, but instead found that I feared my strength just as much as my weaknesses. There was safety in being small, powerless, and inferior, or at least I believed there was, since I felt that in this position I offered little threat to

*Jonah
complex*

client-
therapist
relationship

others and hence would elicit little attack, especially if I combined this with a placating, supplicant manner. Hence my self-image and one of my main modes of relating was as a small, scared boy. Coupled with this was a proclivity to use pain and suffering, either my own or another's, as a bridge for relating, since it was okay to be with someone if one of us was definitely in the inferior position and hence there was no implication of status struggle. These are further examples of the earlier-mentioned principle of the utilitarian nature of pain and symptoms. A very powerful therapeutic process concerning this Jonah complex occurred toward the end of therapy at which time the traditional patient-therapist roles were transcended and the relationship between my therapist and me assumed more of a peer status. This occurred after I was forced to recognize that I could continuously create problems to be worked out in therapy as a means of comfortably structuring the relationship between the therapist and myself by pushing us into our traditional roles. Paradoxically it took courage not to create more problems to work on and to assume a position of equality. At the same time I'm aware that I was extremely fortunate to be with someone who had the even greater courage to transcend the therapist role.

doing
and
being

Gradually there emerged into awareness, perhaps concomitantly with the reduction in anxiety—though which is chicken and which is egg I'm not sure—a sense of 'not having to do anything'. This first became apparent during periods of silence in the therapy sessions at which time I would experience anxiety and seek to rapidly fill this void with activity (usually problem-seeking and solving), anything to avoid the nakedness of our just being together. Gradually my therapist's oft-repeated statement that "maybe you don't have to do anything" began to sink in, together with an increasing faith in our inner wisdom and guidance. Gradually it began to dawn that perhaps I didn't have to feel so 'active' and 'doing' in getting things done. There was also the discovery that inner emotional problems didn't necessarily have to be 'worked on or worked out', but that I could at least sometimes simply witness them and watch their evolution and resolution. This sense has increased to the point where I now wonder whether the sense of 'doing' may not actually be an illusion, an epiphenomenon of consciousness, and an ignorance of the incredible proportion of consciousness and behavior determined by unconscious factors. During instants of special clarity and low anxiety, I have sensed that the growth game is one of less and less doing and more and more being and that the sense of doing or the need to do comes out of a fear that the being, or our inner process, is not perfect, a sense which may correspond to the Eastern idea of surrender.

Towards the end of therapy the incredible power of beliefs and models to function as self-fulfilling prophecies began to become apparent. So much so that I would now agree with John Lilly's (1972) comment that "within the province of the mind what I believe to be true is true, or becomes true, within limits to be found experientially and experimentally. These limits are further beliefs to be transcended. In the province of the mind there are no limits." The extent to which I, and I suspect all of us, underestimate the pervasiveness and power of our beliefs staggered me. I was particularly impressed by the number of negative beliefs which are the effective source of much of my pain. Beliefs such as "you can't feel this good for long, they won't like you if you seem too happy, you deserve to suffer, you have to suffer to feel good, you can't feel good while you're doing x," and many others, exert powerful influences.

*functions
of
beliefs*

Yet another amazing discovery was the incredible importance of the here and now. I began to become aware that my consciousness is usually divided with one part focusing on the inner and outer stimuli of the moment, and another part fantasizing future or past events. This effectively constitutes a diffusion of consciousness. Furthermore, the internal dialogue, the never-ending, repetitive statements, judging and punishing, etc., occur within this fantasy component of consciousness, and the extent to which this is discarded is the extent to which we are one-pointed and here now. I even reached a point of wondering whether in fact there can be psychological pain if we are completely in the here and now, since psychic pain comes out of comparing what is with what was or what might be. The corollary of this is that if there is psychological pain then we are not in the here and now and that the pain may be used as a self-correcting feedback signal to guide us back into the present. Another corollary is that when we are conscious of and choose to center ourselves in our emotions of the moment, then the sense of available energy seems to increase dramatically. I also have the sense that our potential for changing ourselves is greatest when we are centered in this emotion, perhaps a further example of state-dependent learning.

*'here
and
now'
and
pain*

As the internal stream of consciousness became more accessible it also became more available as a source of information to which I could turn at any time to find out what I was feeling, wanting, hoping for, valuing, fearing, etc. As my faith in this source of knowledge increased, I began to gain an appreciation of the saying that "the answers are available inside," and also that the growth experience is one of recognizing what we already know. This sense of the presence of inner wisdom was a very beautiful one and resulted in a feeling of greater autonomy and field-independence and also some reduction in

the striving for external knowledge and acknowledgement. There was also an appreciation of the saying that we only know ourselves.

*creating
feelings
and
experiences*

As these feelings and awareness deepened, there came a dawning recognition of what I can only call our God-like nature. Feelings and experiences don't just happen but are actively created by us, and then we live in them and almost always we lose ourselves in them, forgetting who is their creator. This awesome recognition frightened me in therapy, and I think that I suppressed most of my awareness of it and still do to a large extent since its implications are literally mind-boggling. On those rare occasions when I do confront them, I experience fear in the recognition of our incredible power and our aloneness in it. These realizations did lead to some changes in perspective during the later parts of therapy. Whereas previously I had seen symptoms as givens to be struggled with, analyzed and fought, I now sometimes remembered to take one step backwards and see that I was their creator and had a choice of letting them go. The slogan, "since we create our experience, we might as well create a good one," became a catch-phrase for me, but was of course more often forgotten than remembered.

*interpersonal
relations*

Interpersonal relationships changed pretty dramatically during the course of therapy. I began to take a greater interest in people and spent more time with friends than I had done in many years. My interest in being with people changed from intellectual discussions to exchanges on a deeper emotional level about ourselves and our reactions to each other, and the sharing of existential discoveries. This was associated with a reduced fear of intimacy and pseudohomosexuality. As I became more sensitive to my own inner process, I also became more sensitive and empathic to others. My confidence increased and I began to fall into the trap of inferiority less often, although to counterbalance this statement I should mention that I began to imagine myself on the other side of the dichotomy and on some occasions felt superior to others.

The reactions of others varied widely. At one extreme there was delight on the part of people who shared similar growth-oriented goals, while from others there was occasional anger. I am not clear on the precise source of some of this anger, and undoubtedly some of it stems from the release of various obnoxious quirks which I had formerly timidly hidden. However, it also feels as though others were threatened by some of the changes that I was making. One person that I was close to seemed threatened by the intimacy of my relationship with the

therapist and fearful of the extent to which I asked her to share her feelings and open herself in the ways I had learned. Particularly interesting were the reactions of some of my colleagues who, it seemed, were also threatened, and it was even remarked that I would probably end up on the beaches of southern California selling candles. I suspect that if it had not been for the support of my therapist and several close friends, I might well have considered going back to old ways and defenses. I suspect the reason I may have been threatening is that my colleagues and I formed a pretty homogenous group with similar obsessive defenses, and my questioning of these defenses, however tentative, represented a significant threat to us all.

*reactions
of
others*

Towards the end of therapy there was a change in my experience of both therapy and nontherapy so that the dichotomy began to disappear. I was feeling particularly good at this time and began to experience more and more a meditative perception so that I watched or witnessed myself more frequently. Life began to become therapy, and both therapy and life began to become a meditation. At this stage large portions of the therapy time were occupied with a simple meditative experiencing in which words felt superfluous. As emotions arose there was more a sense of being able to watch them and let them be instead of being driven and consumed by them.

In the light of the new knowledge gained from these two years of therapy, I was able to look back at my own life, at the lives of others, and some of society's and psychiatry's norms as narrowly and tragically founded in ignorance and fear. The Freudian tradition, at least parts of it, seemed to spring from and to perpetuate, a tragic sense of inner warfare and self-distrust, to be ameliorated but never transcended. And this also seemed to be how we live our lives—fearing and distrusting our unknown inner motives, and consequently unable to risk finding out that they are anything other than the feared monsters. I was left with a very Socratic view of all human suffering and misery coming out of our ignorance, especially our ignorance of ourselves. It was and continues to be hard for me to realize that the answers to life aren't found in academia as I had so fondly imagined.

*a
Socratic
view*

Looking at the other side of the dichotomy I can certainly see that I managed to create some adverse effects from the therapy experience. In general these seemed to come out of either a fear of the unknown or the trap of power. As I gained in confidence and assertiveness, I was no longer so inhibited in showing people the positive side of myself. One particularly

*adverse
effects*

important trap here was the need to be seen as knowledgeable and wise. As soon as I learned anything in therapy, I was very keen that the rest of the world should appreciate my new-found wisdom and acknowledge it appropriately. When this wasn't done, as happened not infrequently, I became very irate and berated people for their narrowness, stuckness, and unwillingness to move. Strangely enough this did very little to enhance my popularity. Along with this came a sense of power which I really revelled in after a lifetime of feeling inferior. Now there were times when I actually enjoyed being criticized because of the sense of luxuriating in my immunity and my ability to counteract such attacks. With such reactions as these, it's not surprising that I managed to create quite a number of attacks on myself and to thereby see even further evidence of people's stuckness and ignorance. Along with this there was an occasional switch from feelings of inferiority to superiority, a transition I am still wrestling with. This trap is a big one for me since I tend to view those who don't share my psychological orientation and insights as less than myself. To some extent I can still feel myself luxuriating in this sense of superiority after a lifetime of feeling the reverse, but I am also very much aware of the need to get beyond this dichotomy.

*increased
self-
observation*

Another dichotomous switch has been from avoidance of self-observation and analysis to obsession with it. This can get pretty boring for people, even myself, and provides a ready trap in that it very effectively gets me off the point and out of the here and now. Another fear arose when I saw that the direction of this voyage runs so counter to many of society's norms. This led to a lot of anxiety at various stages, wondering how I would fit in with other people, whether I would be able to communicate with them, whether I would become a drop-out, whether I would be able to or want to function in a traditional work-role, etc. etc. Some of these fears diminished towards the end of therapy but have fluctuated since then.

One of the other adverse (or at least very painful) effects of therapy was a strong fear upon recognizing that this voyage was one into the unknown ("a growth choice is always into the unknown," Bugental, 1965). This fear was so intense and on some occasions was combined with such strong waves of extreme energy that I feared I might be showing the first signs of a schizophrenic break. But the more I learn about schizophrenia and about the experiences of some very healthy people, the more similarities I see, the major differentiating factor being voluntary control of the experiences. Ah well, at least this way I can see myself as healthy rather than crazy.

Looking at this therapy experience from a more theoretical perspective, I can see therapy in general and each moment in particular as a microcosm of life and a tool for achieving whatever we really intend to achieve. Like any other experience, we can use therapy to open up, to grow, to feel good, to feel bad, to regress, to become dependent, etc. etc.—whatever we want we can move towards in therapy. This may partially explain the strange results of studies exploring the effectiveness of psychotherapy which have repeatedly demonstrated that some people get better and some deteriorate: such an outcome is just what would be expected from this perspective.

These experiences have, of course, led to considerable thinking about just what is health, and several insights emerged during these months. Dimensions which seem particularly important are trust and acceptance of self, flexibility (reduced attachment), and an increased ratio of approach behavior as compared with avoidance behavior. I can also see how difficult is the task of validating experimentally the effects of psychotherapy, at least of a nonbehavioristic type. So many of the changes I experienced were subjective, rather than changes in objective behavior, that I really don't know if anyone using traditional psychometric methods would be able to detect them. In addition, the catalytic nature of the therapy experience interacted with everything else in my life in such a manner as to open the rest of my life into a therapeutic experience. Thus I can only conceive of the therapeutic effects as part of an interacting spiral of events which, hopefully, still continues. In any event, whether externally validatable or not, this voyage of discovery was the most incredible I've ever known.

*validating
therapeutic
effects*

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