
MEDITATION IN PSYCHOTHERAPY

by

Frank Kevl in

Meditation has been used as a form of therapy in various ways over the ages. Research into its effects have been carried out recently by the Transcendental Meditation movement. They have named it the **relaxation response**. However, the word "meditation" is so general, that it could equally accurately be called the **concentration effect**, or even the **intensity effect**.

Among humanistic practitioners, the forms of meditation currently most in use include guided talk meditations, musical meditations, guided fantasies and visualisations, deep breathing techniques and Hatha Yoga types of postural meditations. But in a wider sense, one could also include dancing, chanting and prayer.

From the great range of approaches mentioned above, it is clear that meditation is a kind of intentional internalised experience in which both mind and body are attuned and aligned in a unique way. The result of such an attunement seems to be a kind of release or sense of peace.

This effect is the main reason why meditation is and can be used in conjunction with other forms of psychotherapy. Personally, I tend to use it more when working analytically and less when working experientially with clients. Other therapists no doubt have different ways of combining meditation with their methods.

The first problem to overcome regarding the use of meditation is the "how to do it". All sorts of methods exist concerning the "right" way to meditate, and many are conflicting and contradictory.

Hatha Yoga was originally developed for Brahmins, in ancient India, when the caste system was very powerful (and still is to a great extent even today). Sweating was socially unacceptable among Brahmins being an attribute of the lower castes who engage in physical labour. So Hatha Yoga is a strain-free system befitting the Brahmin style.

Similarly, all kinds of meditation are useful and differ mainly because they have been developed in the context of a particular culture by particular people for particular needs. So, some chanting styles may be what you personally respond to, while others may not. Whenever a rigid "technical" approach is taught, I try to avoid the dogma and at the same time learn the usefulness and depth of the system.

There is a limit to how much talking can be done with most "talk" therapies. The same is true of beating pillows or "chairwork". Eventually, there comes a time when one needs to integrate, or to let go or to access a deeper inner source of healing. At this time, the use of meditation or prayer emerges.

An example of this was a client who recently came to thank me for having pointed her towards prayer. She had a terrible (and virtually non-existent) relationship with her daughter, and had herself as a daughter had a similar non-existent relationship with her own mother who had been dead for many years.

During therapy, she realised that the blocked mother-daughter relationship mirrored the blocked daughter-mother relationship. She asked me if there was a way she could change her relationship with her dead mother, and I suggested she should try praying for an opening to her.

Three weeks later, she had prayed and the relationship with her daughter had begun to shift. This change could be attributed entirely to prayer, or to the psychic effect of the therapeutic work, or indeed to any other cause. Nevertheless, as far as she is concerned, the prayer worked; it was real. The prayer was, in some way, a therapeutic intervention.

Special meditative techniques, comparable to hypnotic suggestions or storytelling, are often useful in helping to bring about further inner changes. From a theoretical perspective, it seems that the use of metaphor and allegory in meditation, as the result of a special kind of storytelling, enables the listener to translate the symbolic content of the story or the characters (archetypes) into new meaningful interconnections at an unconscious level.

I remember well the first time my Sufi teacher guided me in a deep trance to "disintegrate". The instruction simply to let go completely without the precondition that I would have to return or find myself again was incredibly powerful.

Of course, I did return, and the empty space in between was the deepest and most complete rest I have ever experienced. No tranquilliser or hypnotic drug could have offered me that moment of "freedom from myself". The result was that subsequently I was able to take a number of major existential decisions, which I had to that time been unable to access myself.

There is much condemnation at present of the use and abuse of drugs to produce altered states of consciousness. Nevertheless, such drugs have been a favoured method of achieving trance or meditative states in many cultures for hundreds of years. And the more we learn about the history of meditation, the more we discover how sacred mushrooms, berries and other plants were instrumental in opening the mind to the wider transpersonal reality and especially to deeper emotions and psychic experiences.

Personally, I question the use of drugs in meditation because our modern western culture has no esoteric tradition of deeper meditative or spiritual purposes in the context of which such substances can be used with appropriate care and knowledge.

So in this respect, I would consider any use of drugs an abuse. However, it is also important to be aware of the enormous psychic release which substances, such as mescaline or LSD, can in fact bring about. And it must also be remembered that a tremendous and miraculous psychic energy potential is locked up within the human psyche. This energy can be released to good use and for personal development.

A common way to release this psychic energy is through the use of trance experiences.

Trances are usually induced by the use of rhythmic, repetitive or monotonous sounds, chants and movements. During such altered states, the psychic source of emotion and existence is occasionally freed. Such an experience can be powerful, cleansing, purifying and result in an exalting psychic effervescence.

Depression and anger can also be released in trances, as well as hate and despondency. Trances can liberate love and unity and all kinds of healing powers may be energised and diffused throughout the body as well as the mind. So this kind of meditation is particularly powerful and effective.

And as with all powerful tools, it can be abused. However, this does not invalidate the use of trance experiences, but simply raises important questions about how they are used and by whom.

The physical and biochemical changes involved in trance states are considerable. There is a certain amount of research that has been carried out, especially in regard to brain wave patterns, but there is much that we still do not understand. For example, during chanting, intensive breathing and strong body movements can continue for hours, while in normal situations it would not be possible to maintain such long periods of vigorous physical effort.

Other extraordinary phenomena occurring during trance states, such as fire walking, are well known, yet little is understood about the remarkable power which the psyche can have over normal physiological processes. A greater understanding of this could well have relevance in the development of psychological methods of pain control.

Tantric Yoga, or sexual meditation techniques, used by the Indian yogis, the Chinese mandarins and others, have also become known in the West. It is possible that the actual art of using such techniques is lost in the heat of the moment. However, it is clear that an intense, yet controlled emotional/sexual experience seems also to mobilise very powerful psychic effects. Just how relevant this is for use in psychotherapy, where sexual contact is inappropriate, is questionable.

If we extend, however, psychoanalytic theory, behavioural models or psychosexual therapy as used today, it is conceivable that therapeutic approaches based on Tantric-like sexual meditations might be incorporated as personal or interpersonal therapies in some cases. Of course, such meditations would be considered more in harmony with humanistic ideas, than with psychoanalytic practice as it is today.

But, to remain more in the practical realm of current humanistic approaches, I would suggest that a therapist can easily add simple meditative techniques to any existing repertoire of interventions. The basic ones, for instance, would be:

i To maintain a comfortable silence with the client with the eyes closed.

ii To use a simple guided fantasy chosen from one of the many available, such as a walk in a garden of relaxation, and so on.

iii To guide the client through a simple autogenic training session using deep breathing combined with muscle tensing and relaxing and focussed attention.

iv To play selected relaxation music for a while, to allow the client to withdraw inwardly

v To repeat together with the client a simple affirmation for a while with the eyes closed. This could be, for example: "I am open to love; I am open to feelings; I am open to be myself....." and so on.

Many versions of these five basic types of meditation exist and are readily available in books on this subject.

If these techniques are used for, say, five to ten minutes at the end of a 90-minute session, there is often a greater and deeper integration of the work done in the session, and it is likely to last longer. It is possible to check this effect at the beginning of the next session and see how much better the client remembers what happened. Other effects, such as dreaming, can also be stimulated using this kind of approach.

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In ending, I should also point out the existential crisis involved with all depression. No matter how good the talk therapy is, no matter how adept the analysis, one still cannot help solve the main existential negation of a depression. The client will still see life as essentially futile and hopeless.

In these situations, the will to choose life is essentially a transpersonal/spiritual crisis which requires the client to get in touch with his or her own spiritual centre. Most therapeutic interventions and models aim to help clients to contact their feelings and their emotional centre. The existential crisis however, stems from a much deeper source in the human psyche. So meditation is needed as a different kind of intervention, aiming at helping the client to get in touch again with this inner spiritual source.

And perhaps this is the ultimate goal of all psychotherapy.

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