



DELTA LIFE SKILLSsm



EMOTIONAL FREEDOM IS IN YOUR HANDS with REBsm

Integral Energy Psychology

Phillip W. Warren, B.A., Ph.C., Zetetic Scholar, Professor Emeritus

4459 52A St., Delta, B.C., V4K 2Y3 Canada

Phone and voice mail: (604) 946-4919

EEmail: phillip_warren@telus.net

Website: www.rebprotocol.net

U.S. mailing address: P.O. Box 1595, Point Roberts, WA 98281-1595

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23.6. THE DEVELOPMENTAL SPECTRUM OF CONSCIOUSNESS, PSYCHOPATHOLOGY, and THERAPY

23.6.1. INTRODUCTION

(from The Collected Works of Ken Wilber, vol. 4 introduction taken from the internet source
See Table 23.6.1. for the overview.

"This phase-3 model [of the development of Wilbers thought] was first presented in "Ontogenetic Development: Two Fundamental Patterns," in The Journal of Transpersonal Psychology, vol. 13, no. 1, 1981 (which was included in volume 3 of the Collected Works). That was followed by a two-

part series in the same journal, "The Developmental Spectrum and Psychopathology: Part 1, Stages and Types of Pathology; Part 2, Treatment Modalities," which were then included in Transformation of Consciousness: Conventional and Contemplative Perspectives on Development (included in volume 4 of the Collected Works), which I [Wilber] coedited with Harvard psychologists Jack Engler and Daniel P. Brown (with contributions by Mark Epstein, Jonathan Lieff, and John Chirban). Both Engler and Brown had done pioneering--and still unsurpassed--research into the cross-cultural stages of the meditative path. What they found--using, I [Wilber] might add, a perspective of dynamic dialecticism--was the following: 'The major [spiritual] traditions we have studied in their original languages present an unfolding of meditation experiences in terms of a *stage model*: for example, the Mahamudra from the Tibetan Mahayana Buddhist tradition; the Visuddhimagga from the Pali Theravada Buddhist tradition; and the Yoga Sutras from the Sanskrit Hindu tradition [these were subsequently checked against Chinese and Christian sources]. The models are sufficiently similar to suggest an underlying common invariant sequences of stages, despite vast cultural and linguistic differences as well as styles of practice.... The results strongly suggest that the stages of meditation are in fact of cross-cultural and universal applicability (at a deep, not surface, analysis).' In the same volume we included an in-depth study by Harvard theologian John Chirban of the stages of spiritual development evidenced by saints in Eastern Orthodox Christianity. Chirban's conclusion: 'Although each saint describes his own experience (often in his own unique way), basic parallels emerge as one compares the stages of the saints with one another. This sameness confirms the catholicity of their experience...' --and the catholicity (or universal applicability) of the basic waves of consciousness themselves, which are similarly reflected in these numerous cross-cultural sources..."

"Transformations of Consciousness [Wilber, Engler, and Brown (1986)] took as a reference point an enduring truth of the Great Nest of Being: them unfolding of ever-richer realms of consciousness, from matter to body to mind to soul to spirit. My [Wilber] chapters focused on outlining a full-spectrum model of consciousness, which consisted of three major components: 1) the *basic structures* or levels or waves of consciousness--*matter*, vital *body* (sensation, perception, impulse), *mind* (image, symbol, concept, rule/role, formal-reflexive, vision-logic), *soul* (psychic, subtle), and *spirit* (causal, nondual); 2) the numerous different *developmental lines or streams* (such as self-identity, self-needs, and morals) that proceed through those major waves; and 3) the *self* (or self-system), which has to integrate all of the various waves and streams."

"Focusing on the self and its journey through the basic waves of the Great Nest, I [Wilber] examined *the major milestones in the self's development*. Each milestone of self-development I called a *fulcrum*, which is a 1-2-3 process of fusion/embeddedness, differentiation/transcendence, and inclusion/integration. That is, the growth of the self involves a progressive identification with a particular wave in the Great Nest, followed by a differentiation from (and transcendence of) that wave, which is then included and integrated from the next higher wave in the Great Hierarchy. The self's evolution is thus transcend-and-include, as deeper and higher waves of the Great Nest of Being unfold in its own case, from matter to body to mind to soul to spirit."

"Of course, development is not nearly as sequential as that sounds; and, given the fact that there are actually numerous different developmental lines all moving relatively independently through the Great Nest, the self's *overall development* is very uneven and nonlinear--it can make progress in cognitive, emotional, psychological, spiritual, and other lines *in a very uneven way*, nor must any of those lines be completed before the others can begin. There is nothing sequential or stage-like about overall development..."

"What seemed to confuse a few critics is that, even though overall development is not linear or

sequential, a great deal of empirical evidence continues to demonstrate that many of the *individual developmental lines* themselves (such as cognitive, ego, and moral) do in fact unfold in a relatively invariant, holarchical sequence (they unfold through the universal waves of the Great Nest of Being--preconventional to conventional to postconventional to post-postconventional. This evidence is discussed at length in Integral Psychology, and summarized in figs. II and III in that book...)"

"The preponderance of evidence strongly suggests that... sequentiality is ...true for the developmental line of *self-identity*, or what Jane Loevinger has investigated as "ego development." I [Wilber] call this immediate sense of self-identity the "proximate self" because it is intimately experienced as an "I" (in distinction to the distal self or "me"). And, as I [Wilber] started to say, each time the *proximate self* moves through a basic wave of the Great Nest, it goes through a *fulcrum* of its development: it first identifies with a new wave, then disidentifies with and transcends that wave, then includes and integrates that wave from the next higher, wider wave. I [Wilber] summarized the Great Nest as possessing nine basic waves of consciousness (sensorimotor, phantasmic-emotional, rep-mind, rule/role mind, formal-reflexive, vision-logic, psychic, subtle, and causal/nondual), and therefore I outlined the *nine correlative fulcrums* that the self goes through in a complete evolution or development through the entire Great Nest."

"Each time the self steps up to a new and higher sphere in the Great Nest of Being, it can do so in a relatively healthy fashion--which means it smoothly differentiates and integrates the elements of that level--or in a relatively pathological fashion--which means it either *fails to differentiate* (and thus remains in fusion/fixation/arrest) or it *fails to integrate* (which results in repression, alienation, fragmentation). Each wave of the Great Nest has a qualitatively different architecture, and thus each fulcrum (and pathology) likewise has a qualitatively different structure. I [Wilber] therefore outlined *nine levels of pathology* (psychosis, borderline, neurosis, script, identity, existential, psychic, subtle, causal), and suggested the correlative *treatment modalities* that seem to best address these different waves of pathology (pacification, structure building, uncovering, cognitive, introspection, existential, the path of yogis, saints, and sages). All of these--the nine basic structures, the correlative self-fulcrums, the types of self pathology that can be generated if something goes wrong at each fulcrum, and the treatment modalities that seem best suited to each..."

"Needless to say, these were meant only as the most general of generalizations, useful insofar as they alert us to the very different contours of the various waves in the Great Nest of Being, and the correlatively different fulcrums of the self's journey through those waves. All too often, one particular psychotherapeutic approach (psychoanalysis, Gestalt, neurolinguistic programming, holotropic breathwork, transactional analysis, biological psychiatry, etc.) is used for *all* types of psychopathologies, often with unfortunate results. Rather, the one thing we learn from the existence of the multiple waves of the spectrum of consciousness is just how many different dimensions of existence there are, and how a sensitivity to these multiple dimensions demands a multiplicity of treatment modalities."

"The nine general levels of therapy that I [Wilber] outlined are meant to be suggestive only; they are broad guidelines as to what we can expect, based on a careful reading of the evidence compiled by numerous different schools of developmental psychology and contemplative spirituality (an overview of this evidence is given in Integral Psychology). There is, needless to say, a great deal of overlap between these therapies. For example, I [Wilber] list 'script pathology' and 'cognitive therapy' as being especially relevant to fulcrum-4, which is where the self identifies, for the first time, with the rule/role mind. That is, the self can begin to take the *role* of others and learn the *rules*

of its society. If something goes wrong during this general developmental period (which typically covers ages 6 to 12), the result is a 'script pathology,' a series of distorted, untrue, unfair ideas and scripts about one's self and others. Cognitive therapy has excelled in rooting out these maladaptive scripts and replacing them with more accurate, benign, and therefore healthy ideas and self-concepts. But to say cognitive therapy focuses on this wave of consciousness development is *not* to say it has no benefit at other waves, for clearly it does. The idea, rather, is that the farther away we get from this wave, the less relevant (but never completely useless) cognitive therapy becomes. Developments in fulcrums 1 and 2 are mostly preverbal and preconceptual, so conceptual reprogramming does not directly address these levels; and developments beyond fulcrum-6 are mostly transmental and transrational, so mental reprogramming, in and of itself, is limited in its effectiveness. So it is not that a given therapy applies only to one narrow wave of development, but that, in focusing on one or two waves, most forms of therapy increasingly lose their effectiveness when applied to more distant realms."

"Also, it is generally true, as I [Wilber] first suggested in The Spectrum of Consciousness, that the therapies of one level will acknowledge and often use the therapies from lower levels, but they are reluctant to recognize any level higher than their own. Thus, classical psychoanalysis will recognize the importance of instinctual and emotional drives, but downplay the importance of cognitive scripts themselves. Cognitive therapists emphasize the importance of those scripts but downplay or ignore the importance of the total psychophysical organism (or centaur), which humanistic and existential therapists emphasize. And existential therapists often vehemently deny the importance or even existence of the transpersonal and transrational levels. By assigning each therapy a general level on the overall spectrum of consciousness, I [Wilber] was also taking those particular facts into account--the therapy at one level will usually acknowledge and even use all of the therapies from lower levels, rarely from any higher (whose existence, in fact, they usually pathologize)."

"Transformations of Consciousness focused almost exclusively on interior developments in individuals--focused, that is, on what I [Wilber] would later call the Upper Left quadrant. Its conclusions are still quite sound for that quadrant, I [Wilber] believe, but a more balanced view would also include insights from all four quadrants, even when trying to understand individual development and pathology (as explained in Integral Psychology). The subjective events in individual consciousness are *always* intimately interrelated with objective events (such as brain physiology), intersubjective events (such as cultural background and context), and interobjective events (such as social institutions and the techno-economic base). As Sex, Ecology, Spirituality and A Brief History of Everything explained at length, all four of those quadrants mutually interact (they are embedded in each other), and thus all of them are required in order to understand any of them. The conclusions of Transformations of Consciousness are still valid, they simply need to be inserted into a four-quadrant view, which would include an understanding of the role of neurophysiology on consciousness development and neuropharmacology on psychopathology (Upper Right), as well as the role of multiple cultural contexts (Lower Left) and modes of social production (Lower Right)--all of which, as we will see, are emphasized in Integral Psychology. Ironically, now that biological psychiatry and cognitive science have attempted to reduce all interior consciousness to objective its--reduce Upper Left to Upper Right--the conclusions of Transformations of Consciousness need all the more desperately to be included in an integral view of consciousness."

"The great sages, we might suppose, have traversed all, or certainly most, of the waves in the Great Nest of Being; but since that it is relatively rare, to put it mildly, few therapists would ever see all nine fulcrums of self development. Many therapists told me [Wilber], after reading Transformations of Consciousness, that what they saw in therapy did not look like that nine-level map! I quite agree. In

fact, most forms of typical psychotherapy deal only with a few levels: mostly fulcrum-3 (which involves uncovering and integrating repressed feelings and shadow elements), fulcrum-4 (which involves belongingness needs and cognitive reprogramming of harsh scripts), and fulcrums 5 and 6 (which involve self-esteem and self-actualization). In terms of "contacting feelings" and "uncovering the shadow," most therapeutic work occurs at fulcrum-3, which is the point where the conceptual mind first emerges and differentiates-and-integrates the body (typically during the oedipal/electra period, ages three to six). Therapies that have focused on this important fulcrum include, of course, psychoanalysis, and two of its more popular and effective offshoots, Gestalt Therapy and Transactional Analysis (both of which also focus on cognitive scripts, which thicken at fulcrum-4, but both of which aim to dig deeper, into fulcrum-3, and expose the psychodynamics and repressed feelings that often underlie script pathology)...."

"...each level of development has a different view of the world--a different worldview, a different paradigm--and that consequently, each of us has, in simply growing up, *already gone through at least a half-dozen paradigm revolutions* , from archaic to magic to mythic to rational to integrative (on the way to transmental levels altogether)." The following is taken from Wilber, Engler and Brown, (1986)

Section 23.6.2 describes the nine levels or stages of development of consciousness along with the self (or self-system) that is developing thorough these stages.

Section 23.6.3 describes the particular pathologies that may arise at any of these levels or stages of development of consciousness.

Section 23.6.4 describes the types of possible treatment modalities or therapeutic interventions that seem most appropriate for each of these classes of pathology.

HERMAN



**Millions of years of evolution,
and that's the latest model!**

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	Basic Structures of Consciousness and Corresponding Fulcrums/Milestones of Self-Development	Characteristic Psychopathologies	Treatment Modalities
T r a n s p e r s o n a l	9. Causal. Unmanifest source or ground of all. Formless	Causal Pathology	Path of Sages
	8. Subtle. Seat of actual archetypes and Platonic Forms	Subtle Pathology	Path of Saints
	7. Psychic. Culmination of vision-logic and visionary insight	Psychic Disorders	Path of Yogis
P e r s o n a l	6. Existential; Vision Logic	Existential Pathology	Existential Therapy
	5. Formal-Reflexive. Formal operational thinking	Identity Neuroses	Introspection
	4. Rule/Role Mind. Concrete operational thinking	Script Pathology	Script Analysis
P r e p e r s p i c a l	3. Rep-Mind. Pre-operational thinking.	Psychoneuroses	Uncovering Techniques
	2. Phantasmic-Emotional, sexual	Narcissistic-Borderline Disorders	Structure-Building Techniques
	1. Sensoriphysical. Matter, sensation, perception	Psychoses	Physiological/Pacificatio n

Undifferentiated Matrix

Table 23.1. Correlations of Structures, Fulcrums (Developmental Milestones/Choice points/Stages), Psychopathologies, and Treatments

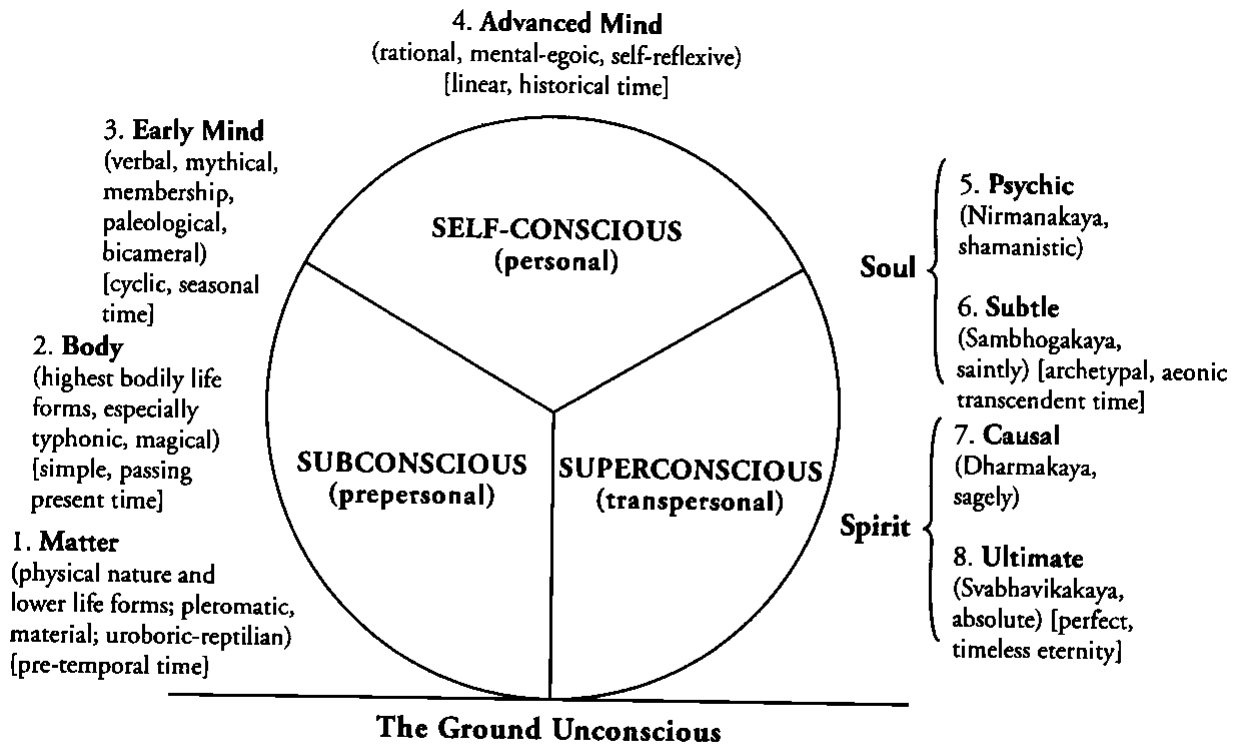


Figure 23.8. The Great Nest of Being and the Complete Developmental Sequence from Up From Eden.

23.6.2. THE SPECTRUM OF DEVELOPMENT OF CONSCIOUSNESS

The following is taken from Wilber, Engler and Brown, (1986)

Section 23.6.2 describes the nine levels or stages of development of consciousness along with the self (or self-system) that is developing thorough these stages. See Table 23.1. and Figure 23.8. for the overview.

23.6.2.1 THE BASIC AND TRANSITION STRUCTURES AND SELF SYSTEM

"...[T]he structures or formations of the psyche are divided into two general types: the basic structures and the transition structures (each of which contains numerous different developmental lines). The *basic structures* are those structures that, once they emerge in development, tend to remain in existence as relatively autonomous or sub-units in the course of subsequent development...*Transition structures*, on the other hand, are phase-specific and phase-temporary structures that tend to be more or less entirely replaced by subsequent phases of development... basic structures tend to be subsumed, included, or subordinated in subsequent development,... transition structures tend to be negated, dissolved, or replaced by subsequent development...Negotiating these structural developments is the self (or self-system), which is the locus of identification, volition, defense, organization, and 'metabolism' ('digestion' of experience at each level of structural growth and developments). (p. 67) "[T]he nine major levels presented are *functionally dominant in development*, and... an adequate and fairly accurate account of development can be presented with...these nine general levels." (p. 74)

23.6.2.1.1. THE BASIC STRUCTURES

"The most notable feature about a basic structure or level of consciousness is that, once it emerges in human development, it tends to *remain in existence* in the life of the individual during subsequent development. Even though it is eventually transcended, subsumed, and subordinated by the self's movement to higher basic structures, it nevertheless retains a relative autonomy and functional independence. The basic structures of consciousness are, in effect, what is known as the Great Chain of Being... [Wilber presents] the nine most central and functionally dominant structures." (pp. 66-67)

PRE-PERSONAL REALM

23.6.2.1.1.1. UNDIFFERENTIATED MATRIX: "The person at first is almost purely a biological organism with instinctual, reflexive and thalamic responses to stimuli, a primitive unintegrated ego and purely somatic defense mechanisms to maintain homeostatic equilibrium with no discrimination between inside and outside, self and other." (p. 86)

23.6.2.1.1.2. SENSORIPHYSICAL: "The realms of matter, sensation and perception, sensory motor functioning."

23.6.2.1.1.3. PHANTASMIC-EMOTIONAL: "The emotional-sexual level and the phantasmic level or image mind, the simplest form of mental 'picturing using only images.'"

PERSONAL REALM

23.6.2.1.1.4. REP-MIND: "Representational mind, preoperational thinking (preop) develops in two states -- symbols (2-4 years) and concepts (4-7 years). A symbol goes beyond a simple image (the phantasmic mind) in this essential respect: an image represents an object pictorially, while a symbol can represent it non-pictorially or verbally... symbolic representation is a higher, more difficult, and more sophisticated cognitive operation. A *concept* is a symbol that represents... a *class* of objects or acts." (pp. 69, 71)

23.6.2.1.1.5. RULE/ROLE MIND: Concrete operational thinking (conop)... "can begin to take the *role* of others. It is also the first structure that can clearly perform rule operations, such as multiplication, division, class inclusion, hierarchization etc." (p. 71)

23.6.2.1.1.6. FORMAL-REFLEXIVE MIND: Formal operational thinking (formop)... "the first structure that can not only think about the world but think about thinking... the first structure that is clearly self-reflexive and introspective... the first structure capable of hypothetico-deductive or propositional reasoning... which, among other things, allows it to take genuinely pluralistic and more universal views... [it] apprehends and operates on *relationships*." (p. 71)

23.6.2.1.1.7. VISION-LOGIC: "[A] cognitive structure beyond or higher than... 'formal operational.'... [W]hereas the formal mind establishes relationships, vision-logic establishes *networks* of those relationships (i.e., just as formop 'operates on' conop, so vision-logic 'operates on' formop). Such vision or panoramic logic apprehends a mass network of ideas, how they influence each other and interrelate;... the beginning of truly higher-order synthesizing capacity, of making connections, relating truths, coordinating ideas, integrating concepts... This... is the highest integrative structure of the *personal* realm." (p. 71-72)

TRANS-PERSONAL REALM

23.6.2.1.1.8. PSYCHIC: "[T]he culmination of vision-logic and visionary insight... [I]t marks the beginning or opening of transcendental, transpersonal, or contemplative developments: the individual's cognitive and perceptual capacities apparently become so pluralistic and universal that they begin to 'reach beyond' any narrowly personal or individual perspectives and concerns... [A]t this level an individual *begins* to learn to very subtly inspect the mind's cognitive and perceptual capacities, and thus to that extent begins to *transcend* them." (p. 72)

23.6.2.1.1.9. SUBTLE: "[T]he ...seat of actual archetypes, of Platonic Forms, of subtle sounds and audible illuminations of... transcendent insight and absorption...[T]his level is the home of personal deity-form." (p73)

23.6.2.1.1.10. CAUSAL: "[T]he... unmanifest source or transcendental ground of all the lesser structures...the universal and formless self ('Atman') common in all and to all beings." (p. 73)

23.6.2.1.1.11. ULTIMATE: "Passing fully through the state of cessation or unmanifest causal absorption, consciousness is said finally to re-awaken to its prior and eternal abode as absolute Spirit, radiant and all-pervading, one and many, only an all -- the complete integration and identity of manifest Form with the unmanifest Formless...[T]he ultimate is not one level among others, but the reality, condition, or suchness of all levels." (p. 74)

23.6.2.1.2. THE TRANSITION STAGES (OR SELF-STAGES)

"The transition structures are ones that are not included and subsumed in subsequent development but tend instead to be negated, dissolved or *replaced* by subsequent development...[Basic structures, once they come] into existence, ...remain in existence during subsequent development...A simple metaphor may be useful to explain...The basic structures themselves are like a ladder, each rung of which is a level in the Great Chain of Being. The self (or the self-system) is the climber of the ladder. At each rung of that climb, the self has a different view or perspective on reality, a different sense of identity, a different type of morality, a different set of self-needs, and so on. These changes in the sense of self and its reality, which shift from level to level, are referred to as transition structures or...*self-stages* (since these transitions intimately involve the self and its sense of reality)...Each basic structure, then, *supports* various phase-specific transitional structures of self-stages, such as different self-needs,... different self-identities,...and different sets of moral responses. (p. 76)

23.6.2.1.3. THE SELF-SYSTEM

"So far, we have briefly examined the basic rungs or levels in the overall ladder of development, and the transition states (or self-stages) that occur as the self 'climbs' or progresses through those rungs in the course of its own growth. We now turn to the climber itself: the self (or self-system or self-structure). [T]he self-system possesses the following basic characteristics:

"1. *Identification:* The locus of what the self will call the self will call "I" (*central* or *proximate self* or subjective self) and the "me" (the *distal self* or objective self).(p. 78)

"2. *Organization:* That which attempts to give unity to the mind. It is not just a synthesis of the parts or substructures, but is an independent organizing principle. (p. 78)

"3. *Will:* The locus of free choice, but free only within the limits set by the basic structures

of its present level of adaptation. (p, 79)

"4. *Defense*: "The self is the locus of the defense mechanisms (which develop and change hierarchically from level to level of the basic structures); defense mechanisms in general are considered normal, necessary, and phase-appropriate functions; however, if over- or under-employed, they become morbid or pathological." (p. 79)

"5. *Metabolism*: "One of the central tasks of the self is to 'digest' or 'metabolize' the experiences presented to it at each rung of development... Object relations theorists... speak of pathology as 'failed metabolism'-- the self fails to digest and assimilate significant past experiences, and these remain lodged... in the self-system, generating psychological indigestion (pathology). The basic structures of consciousness, in fact, can be conceived as *levels of food* ... These levels of food... are really levels of object relations, and how the self handles these 'food objects' ('self-objects') is a central factor in psychopathology." (p. 79)

"6. *Navigation*: "At any rung on the developmental ladder (except the two end points), the self is faced with several different 'directional pulls.'... [I]t can (within limits) choose to remain on its present level of development, or it can choose to release its present level in favor of another. If it releases its present level, it can move up the hierarchy of basic structures or it can move down. *On* a given level, then, the self is faced with preservation vs. negation, holding on vs. letting go, living that level vs. dying to that level, identifying with it vs. dis-identifying with it. *Between* levels the self is faced with ascent vs. descent, progression vs. regression, moving up the hierarchy to levels of increasing structuralization, increasing differentiation-and-integration, or moving down to less organized, less differentiated and less integrated structures." (p. 79-80)

23.6.2.1.4. SUMMARY OF OVERALL DEVELOPMENT OF THE SELF-SYSTEM

"As the basic structures or rungs begin chronologically to emerge and develop, the self can *identify* with them... Once centrally identified with a particular basic structure, the self, or the self's preservation drive, will seek to consolidate, integrate, and organize the resultant overall complex. This initial identification with a particular basic structure is normal, necessary, and phase-appropriate, and it gives rise to the particular self-stage... associated with or supported by that basic structure."

"If...the central self is to ascend the hierarchy of basic structural development--to grow--then eventually it must release or negate its *exclusive* identification with its present basic rung in order to identify with the next higher rung in the developmental ladder...[I]t must dis-identify with or detach from an exclusive involvement with that level--in order to ascend to the greater unity, differentiation, and integration of the next higher basic level."

"Once identified with the new and higher basic structure, a new and phase-specific self-stage swings into existence; a new self-sense, with new self-needs, new moral sensibilities, new object relations, new forms of life, new forms of death, new forms of 'food' to be metabolized, and so forth. The lower self-stage is (barring fixation) released and negated, but the lower basic structure remains in existence as a necessary rung in the ladder of consciousness, and must therefore be *integrated* in the overall newly configured individual. Once on the new and higher level, the self then seeks to consolidate, fortify, and preserve *that* level, until it is once again strong enough to die to that level, *transcend* that level (release or negate it), and so ascend to the next developmental rung. Thus, both preservation and negation (or life and death) apparently have important phase-specific tasks to accomplish." (p. 80-81)

"...[P]reservation and negation both serve important phase-specific tasks, and... *pathology seems to develop if either (or both) of these tasks is misnavigated*. 'Health' or 'normal' preservation occurs when the identifications and object relations of a particular level are being built, consolidated, and integrated... Morbid preservation... occurs when the once-appropriate identifications and object relations of a particular level are not released to allow room for newer and higher ones. Morbid preservation... is nothing but *fixation*."

"Healthy or normal negation serves several important functions. *Horizontally*, it helps differentiate self and object representations... vertically, it helps the disidentification, differentiation, separation, or transcendence of the lower level in favor of the higher. Morbid negation... is a differentiation or dis-identification from a component before it has been properly integrated, digested, and assimilated. The component is merely split off from the personality. Morbid negation... is simply *repression* (or dissociation, splitting, etc., depending upon the level of structural organization of the defense itself)." (p. 82, underlining added)

23.6.2.1.5. THE FULCRUM OF DEVELOPMENT (CHOICE POINTS and SELF-OBJECT DIFFERENTIATION)

1. *The first fulcrum ('hatching' stage)-- autistic, symbiotic, and differentiating sub phases*. "...[T]he self -system must negotiate the emergence of the physical and sensoriperceptual basic structures of existence. Should this hatching fail, the self-system remains locked in its own autistic-symbiotic orbit, unable, in the worst cases, to even differentiate its sensoriphysical self from the sensoriphysical surround (autistic and symbiotic psychoses); consequently it cannot advance to the second major fulcrum..." (pp. 90-91)

2. *The second fulcrum-- phantasmic-emotional separation-individuation*. "Should it negotiate this first fulcrum adequately... the sensoriphysical organism is adequately differentiated from the sensoriphysical surround. At this point, the self enters the second fulcrum of development, where it must negotiate the emergence and growth of the next major basic structures of existence, the emotional and phantasmic. This involves a differentiation... within the organism itself...---a differentiation of internalized self-images from internalized object-images." (p. 91)

3. *The third fulcrum -- oedipal phase; the differentiation/integration of the (rep) mind and the (emotional-libidinal body)*. "[I]t involves a process of increasing internalization, increasing structuralization and hierarchization, increasing separation-differentiation, and increasing integration... occurring on a new, higher, and qualitatively different level of organization, that of the *newly emerging* basic structures of the conceptual rep-mind, which bring the possibilities of a qualitatively different set of self-defenses (repression), of self-needs, object-relations, possible pathologies (psychoneuroses), and so on... A developmental lesion at this fulcrum results in a *neurotic self-structure*; the central self remains fixated (morbid preservation) to certain bodily impulses, or it represses or dissociates (morbid negation) certain bodily impulses. If, however, this third fulcrum is adequately negotiated, the mind and body are clearly differentiated and integrated in the new and higher-order conceptual self-structure, with a new and higher internalization (superego), and the capacity for *conceptual object constancy* -- the power to hold a whole concept, or class of properties, without confusing or collapsing its component members due to, e.g., libidinal desires." (pp. 94-96)

"*The first three fulcrums of self-development simply represent the self's climb up the first three rungs of the ladder of major basic structures*. At each fulcrum, the self identifies (normal preservation) with the corresponding basic structure, and thus is initially fused with, or

undifferentiated from, that structure and its phenomenal objects. This is followed by a period of separation-differentiation (normal negation), wherein the self-system or self-structure learns to differentiate itself from both the *objects* of that level and the *subject* of the previous level (that is, it transcends its previous and exclusive subjective identification with the previous and lower basic structure). If at any fulcrum there is morbid preservation (fixation) or morbid negation (splitting, dissociation, repression), a characteristic pathology emerges, marked by the level of structural organization at which the lesion occurs... [T]he remaining basic structures or rungs (levels 4 through 9) each involve another and crucial fulcrum of self-development, and lesions at those fulcrums also generate specific and definable pathologies (which in turn respond to different treatment modalities or therapeutic interventions)."

4. *The fourth fulcrum -- the differentiation/integration of the rule/role (conop) mind and the (rep) oedipal projects.* "[T]he central self transcends its exclusive identification with the rep-mind (and its oedipal projects) and begins to identify with the rule/role mind. The rule/role mind (or 'conop')... is the first structure that not only can imitate a role, but can actually *take* the role of others. This opens up an entirely new dimension of object relations, with a new sense of self..., a new set of self needs..., a new moral sensibility..., a new mode of life and a new mode of death... The life/death battles... center more on its rules and roles -- a desire to fit in, to belong, to find its place or role among other roles; to *understand* the *rules*; with a correlative fear of losing face, losing role, breaking the rules..." (p. 115)

5. *The fifth fulcrum -- the differentiation/integration of the formal reflexive (formop) mind and the (rule/role) unreflexive binding to social roles and conventional morality.* "[A] highly differentiated, reflexive, and introspective self-structuralization. [F]or the first time [the self] can depend on its own individual principles of reason and conscience... [T]he self can conceive possible (or hypothetical) futures ...with entirely new goals, new possibilities, new desires (life), and new fears (death)...It becomes a philosopher, a dreamer in the best and highest sense..." (p116)

6. *The sixth fulcrum -- the differentiation/integration of the existential ("vision logic" and systems approach) mind with body-mind integration (centauric self) and the (formop) binding to linear logic.* "The existential approach looks at each stage of development, not just in terms of its *content*,... but also from the *context* or categories of existence itself, of the various modes and stages of being-in-the-world... [T]he self structure of this level... is one where 'mind and body are both experiences of an integrated self.'" "[T]he major concerns of the... existential self are: personal autonomy and integration...; authenticity...; and self-actualization... Associated affects are: a concern for overall *meaning* in life (or being-in-the-world); a grappling with personal mortality and finitude; and finding a courage-to-be in the face of lonely and unexpected death... [T]he existential mind (via vision-logic) *adds up* the possibilities and finds this: personal life is a brief spark in the cosmic void." (p. 117-118)

7. *The seventh fulcrum -- the differentiation/integration of the psychic mind and the existential, systems approach ("vision logic") limitations.* There is information in the discussion of "psychic disorders." section 23.6.3.3.)

8. *The eighth fulcrum -- the differentiation/integration of the subtle basic structure of consciousness and the turmoil of beginning psychic awakening.* There is information in the discussion of "subtle disorders" section 23.6.3.3.)

9. *The ninth fulcrum -- the differentiation/integration of the last major fulcrum of self-development and dualistic identifications.* There is information in the discussion of "causal disorders" section

23.6.3.3.)

23.6.3. THE STAGES AND TYPES OF PATHOLOGY

The following is taken from Wilber, Engler and Brown, (1986)

Section 23.6.3 describes the particular pathologies that may arise at any of these levels or stages of development of consciousness. See Table 23.1. and Figure 23.8. for the overview.

23.6.3.1. THE PRE-PERSONAL PATHOLOGIES

1a. Fulcrum: Autistic Psychoses,

1b/c. Fulcrum: Symbiotic Infantile Psychoses, Most adult Schizophrenia, Depressive Psychoses

"The lowest self-structures (autistic, symbiotic, and narcissistic) tend to be *monadic* in nature; the borderline structures, *dyadic*, and the psychoneurotic structures, *triadic*. In the monadic structures, there is basically one player on the stage -- the self is either oblivious of the other (autistic), merged with the other (symbiotic), or part of an omnipotent dual unity with the other (narcissistic). As the monadic structure differentiates, self and other emerge as two distinct, if sometimes tenuous units. There are not two players of the stage, self and (m)other, with all the joy and all the tragedy that that involves." (p. 111-112)

2a. Fulcrum: Narcissistic Personality Disorders. "[T]he self- and object-representations...consist of a grandiose-self-plus-omnipotent-object fused unit. Other persons are *experienced*,... not as separate individuals... with rights and wishes of their own, but as extensions or aspects of the grandiose-exhibitionistic self, serving primary need gratification. The sole function of the world is therefore to *mirror* the self's perfection... The grandiose-self/omnipotent-object fused unit forms the central self; so airtight is this fused unit that it seemingly conceals the underlying empty-rageful-jealous fused unit and its affect of profound abandonment depression. (p. 109) ..." [T]he central self is...a more or less stable phantasmic-emotional-libidinal structure... [T]he self at this stage simply *is* a libidinal self." (p. 112)

2b. Fulcrum: Borderline Personality Disorders. "Unlike the narcissistic structure, the borderline has achieved a partial or quasi-differentiation of self and object representations. A separate individual has started to emerge, but its structure is so tenuous or weak that it constantly fears engulfment by the other or abandonment by the other... The intrapsychic structure... is thus more complex... because it has accomplished more differentiation; but these differentiations are not integrated, leaving the borderline with a series of fractured structures or part-units. The borderline thus typically oscillates between an almost total or chameleon-like compliance with others, which makes him/her feel 'good,' 'accepted,' or 'safe,' and a withdrawn and sullen distancing from others, who -- now experienced as angry, vengeful, and denouncing -- make him/her feel rotten, a worm, totally worthless, despicably bad (and occasionally suicidal)." (pp. 110-111)

3a. Fulcrum: Borderline Neuroses. "[T]hese conditions are either neurotic developments burdened with separation-individuation sub phase deficiencies, or a part-regression to more borderline states in the face of too difficult neurotic-oedipal developments." (p. 111)

3b. Fulcrum: Psychoneuroses. The triadic nature of this stage is where "the conceptual rep-mind has emerged and (ideally) differentiated from the libidinal body. The central self is now identified with, and exists as, a symbolic-conceptual structure, namely, the rep-mind *ego*: no longer a phantasmic-libidinal self, but a conceptual-egoic self... [T]his overall process results in a *tripartite*

structure of the... ego-superego-id... [M]ost conflict is intrapersonal (or intrapsychic)... superego vs. id (inhibition), id vs. ego (anxiety, obsession), superego vs. ego (guilt, depression)... [T]he self is on its climb up the basic structures of existence... The psychoneuroses stand at that great branch point where consciousness starts to move from a generally bodily existence to a generally mental existence..." (pp. 112-113)

23.6.3.2. THE PERSONAL PATHOLOGIES

"The conflicts are much more cognitive than psychodynamic in nature and origin, but can be just as debilitating and distressful. This whole range of cognitive, identity, and existential concerns, I call the 'intermediate' or 'personal realm.'" (p. 114)

Fulcrum 4: The Role Self and Cognitive-Script Pathology or Script Neuroses This involves the "...work of Transactional analysis on game theory and scripts and the communications theorists on role-taking...The preeminent defense mechanism of this stage is the 'duplicitous transaction' -- the individual overtly communicates one message...while covertly implying another...;if the covert message is pointed out, the individual strenuously denies it. The covert messages or hidden agendas are the key pathogenic structures in the Fulcrum 4 self; if extreme, they result in a interior splitting or dissociation of the text-self." (p. 115)

Fulcrum 5: Identity Neurosis. "Identity neurosis' specifically means all the things that can go wrong in the emergence of the self-reflexive structure. Is it strong enough to break free of the rule/role mind and stand on its own principles of conscience? Can it, if necessary, summon the courage to march to the sound of a different drummer? Will it dare to think for itself?' This is Erikson's basic 'identity vs. role confusion' issue. "[P]hilosophical problems are an integral part of Fulcrum 5 development, and philosophical education [is] an integral and legitimate part of therapy on this level." (p. 116)

Fulcrum 6: Existential Pathology. "The common Existential Syndromes include:

1. *Existential depression* -- a global-diffuse depression or 'life-arrest' in the face of perceived meaninglessness.
2. *Inauthenticity* -- ...lack of profound awareness-acceptance of one's own finitude and mortality.
3. *Existential isolation and 'uncanniness'* -- a strong-enough self that nevertheless feels 'not at home' in the familiar world.
4. *Aborted self-actualization* -- Maslow (1971): 'I warn you, if you deliberately set out to be less than you are capable of becoming, you will be deeply unhappy for the rest of your life.'
5. *Existential anxiety* -- the threatened death of, or loss of, one's self-reflective modes of being-in-the-world (an anxiety that cannot occur prior to Fulcrums 5 and 6 because the vary capacity for formal-reflection does not occur until then)." (p. 118)

"...[E]xistential ennui has a specific and unmistakable 'flavor'; a strong and highly differentiated-integrated self-structure presents the symptom; it is a thoughtful, steady, concerned, profound depression; it has none of the 'whining' of the borderline or the guilt of the psychoneurotic; it looks unflinchingly at the cosmos and then, for whatever reasons, despairs of finding any personal meaning." (pp. 118-119)

23.6.3.3. THE TRANSPERSONAL PATHOLOGIES

Fulcrum 7: Psychic Disorders. These include "... all the 'lower level' spiritual crises and pathologies that may 1). awaken *spontaneously* in any relatively developed soul; 2). invade any of the lower levels of development during periods of severe stress...; and 3). beset the *beginning* practitioner of a contemplative discipline."

1. "The most dramatic psychic pathology occurs in the spontaneous and usually unsought awakening of spiritual-psychic energies or capacities..."
2. "One of the most puzzling aspects of transient schizophrenic breaks or psychotic-like episodes is that they often channel rather profound spiritual insights, but they do so through a self-structure that is neurotic, borderline, even frankly psychotic..."
3. "Beginning practitioner -- Psychic pathologies besetting the novice include:
 - a). "Psychic inflation -- The universal-transpersonal energies and insights of the psychic level are exclusively applied to the individual ego or center, with extremely unbalancing results (particularly if there are narcissistic sub phase residues in the self-structure)."
 - b). "Structural imbalance due to faulty practice of the spiritual technique -- This is particularly common in the paths of purification and purgation... It usually manifests in mild, free-floating-anxiety, or in psychosomatic conversion symptoms..."
 - c). "The Dark Night of the Soul -- Once the soul obtains a direct taste or experience of the Divine...and that experience begins to fade (which it initially does), the soul may suffer profound abandonment depression..."
 - d). "Split life-goals -- For example, 'Do I stay in the world or retreat to meditation?' This can be extremely painful and psychologically paralyzing... one form of a profound splitting between upper and lower self-needs..."
 - e). "'Pseudo-duhkha' -- In certain paths of meditation (e.g., Vipassana), where investigation into the very nature of the phenomena of consciousness is stressed, the early phase of awareness training... brings a growing realization of the painful nature of manifest existence itself. Where this realization becomes overwhelming... we speak of 'pseudo-duhkha.' Pseudo-duhkha is often the result of residual existential, psychoneurotic, or, more often, residual borderline contamination of the psychic fulcrum of development. The individual does not gain an understanding of the sources of life; [they] simply go sour on life..."
 - f). "Pranic disorders -- This refers to a misdirection of Kundalini energy in the early stages of its arousal. Various psychic (pranic) channels are over- or under-developed, crossed, or prematurely opened... Pranic disorders are usually caused by improper visualization and concentration... Dramatic psychosomatic symptoms are usually prevalent, including barely controllable muscle spasms, violent headache, breathing difficulty, etc."
 - g). "'Yogic illness' -- This disorder... results when the development of the higher or psychic levels of consciousness puts an undue strain on the physical-emotional body. The great intensity of psychic and subtle energies, can, as it were overload the 'lower circuits,' resulting... in everything from allergies to intestinal problems to heart disorders." (p. 120-122)

Fulcrum 8: Subtle Disorders. "The two vulnerable points ...concern: 1). the differentiation-separation-transcendence of the previous mental-psychic dimension, and 2). the identification-

integration-consolidation of the subtle-archetypal self and its object relations. Apparently, this pathology occurs most often in intermediate-to-advanced meditators. Some of its many forms:"

a). Integration-Identification Failure -- "...Archetypal Presence or Awareness is first apprehended...'above and behind' mental-psychic consciousness. Eventually, as contemplation deepens, the self differentiates from its psychic moorings and ascends to the intuited identification with that... Archetypal Presence or Awareness ...This Identity arises concomitantly with a stable *witnessing* of the object relations of subtle consciousness ...A failure to realize this Prior Identity-Awareness, after the practitioner is in fact structurally capable of it, is the central defining pathology of these syndromes, because it constitutes, at that point, a fracture between self and Archetype...This fracture arises for one basic reason: to identify with and as Archetypal Presence or Awareness demands the *death* of the mental-psychic self. Rather than suffer this humiliation, the self *contracts* on its own separate being, thus fracturing the higher and prior archetypal identity. *Fragments* of Archetypal Presence then appear as objects of a still dualistic awareness, instead of whole Archetypal Presence acting as prior and intuited Subject of transcendental consciousness. In other words, instead of *being* Archetypal Awareness (as a subject), the self, in meditation, merely stares at fragments of it (as objects). Consolidation is not reached." (pp. 122-123)

b). Pseudo-nirvana -- "This is simply the mistaking of subtle or archetypal forms, illuminations, raptures, ecstasies, insights, or absorptions for final liberation." (p. 123)

c). Pseudo-realization -- "As Vipassana meditation proceeds into the subtle levels of awareness, a stage of insight called 'realization' arises (beyond which lies 'effortless insight,' the highest of the subtle-level developments)... [T]his is not a pathology of this stage, but is normalcy at this stage, which involves an intense insight into the ultimately unsatisfactory nature of phenomena when viewed apart from noumenon. The intense pain and revulsion acts as the motivation to transcend all conceivable manifestation in nirvanic absorption. The pseudo-realization pathology occurs when that process fails to quicken and the soul is stranded on the shores of its own agony." (p. 124)

Fulcrum 9: Causal Disorders. "The last major fulcrum of self-development has, for its two branches;... the Formless or Unmanifest and the entire world of Form, or the Manifest Realm. Normal development involves their proper differentiation (in the causal) and their final integration (in the ultimate). Pathology, on the other hand, results from miscarriages in either of these two crucial movements."

a). Failure of Differentiation --"an inability to accept the final death of the archetypal self (which is simply the subtlest level of the separate-self sense) locks consciousness into an attachment to some aspect of the manifest realm. The Great Death never occurs, and thus Formless Consciousness fails to differentiate from or transcend the manifest realm... the final block: desire for liberation." (pp. 124-125)

b). Failure to Integrate, or Arhat's Disease -- "[A] subtle disjuncture, dualism, or tension now exists in consciousness, namely, between the manifest and the unmanifest realms. Only as this disjuncture is penetrated does the manifest realm arise as a modification of Consciousness, not a distraction from it." (p. 125)

23.6.4. TREATMENT MODALITIES

The following is taken from Wilber, Engler and Brown, (1986)
Section 23.6.4 describes the types of possible treatment modalities or therapeutic interventions that seem most appropriate for each of these classes of pathology.
See Table 23.1. and Figure 23.8. for the overview.

Fulcrum 1: (Psychoses) Physiological Intervention.

"These disturbances seem to occur on such a primitive level of organization (sensoriperceptual and physiological) that only intervention at an *equally primitive level* is effective -- namely -- pharmacological or physiological (which does not rule out psychotherapy as an adjunct treatment)." (pp. 127-128)

Fulcrum 2 (Narcissistic-Borderline Disorders): Structure-Building Techniques.

"A common feature of the structure-building techniques [used at this level] is to help clients realize that they can *activate themselves*, or *engage separation-individuation*, and it will not destroy them or the ones they love." (p. 130)

"The central problem in the narcissistic and borderline syndromes is not that the individual is repressing certain impulses or emotions of the self, but that [they do] not yet possess a separated-individuated self in the first place... All the various thoughts and emotions are present and largely conscious, but there is considerable confusion as to *whom* these belong to -- there is...a fusion, confusion, or splitting of the self and object representations. The self is not yet strong enough or structured enough to 'push' contents into the unconscious, and so instead simply rearranges the surface furniture. The boundaries between self and other are either blurred (narcissism) or very tenuous (borderline), and the self shuffles its feelings and thoughts indiscriminately between self and other, or groups all its good feelings on one subject (the 'all-good part-object') and all its bad feelings on another (the 'all-bad part-object')... [T]he aim of therapy on this level is... to build structure.." (p. 128)

"[S]tructure-building techniques' help the individual re-engage and complete the separation-individuation process. That involves an understanding (and undermining) of the two central defenses that the individual uses to prevent separation-individuation from occurring: *projective identification* (or fusion of self and object representations) and *splitting*. In *projective identification* (or merger defense), the self fuses its own thoughts and feelings (and particularly self-representations) with those of the other... This inability to differentiate self and other leads to the self engulfing the world (narcissistic disorders) or the world invading and threatening to engulf the self (borderline disorders). In *splitting*, the particular thoughts and feelings also remain conscious, but they are divided up or compartmentalized in a rather primitive fashion." (pp. 128-129)

"In short, [these] pathologies result because there is not enough structure to differentiate self and object representations, and to integrate their part-images into a whole-self image and a whole-object world. The structure-building techniques aim at exactly that differentiation-and-integration." (pp. 129-130)

Fulcrum 3: (Psychoneuroses): Uncovering Techniques.

"Once a strong-enough self-structure has formed (but not before), it can repress, dissociate, or alienate aspects of its own being. The uncovering techniques are designed specifically to bring these

unconscious aspects back into awareness, where they can be re-integrated with the central self... [T]hese techniques... include psychoanalysis proper, much of Gestalt therapy, and the integrating-the-shadow aspect of Jungian therapy." (pp. 130-131)

"Cognitive-script therapy has significant applications in the Fulcrums 4, 5 and 6 but Fulcrum 4 "is the first major stage in which cognitive-script concerns fully develop and begin to differentiate themselves from the more psychodynamic concerns of the previous fulcrums... [M]any of the cognitive-script pathologies seem to have their genesis in the early (and possibly distorted or limited) rules and roles one learned when the mind *first* became capable of extended mental operations." (p. 133)

Fulcrum 4: (Script Pathology): Cognitive-Script analysis.

At this level we "...look at higher or post oedipal stages of development and their correlative vulnerabilities and dis-eases... The capacity for genuine role taking is a decisively post oedipal development" (p. 131)

"We are dealing with different levels... of development, with different conflicts and vulnerabilities. *These conflicts are much more cognitive than psychodynamic in nature and origin*, because at this point the self increasingly is evolving from bodily to mental levels of the spectrum [of consciousness]. Eric Berne (Transactional Analysis) investigated this level--..."the text self or script self--on its own terms, without reducing it to merely psycho-neurotic or libidinal dimensions." (p. 132) "Cognitive-script analysis" refers to activities carried out by cognitive role theorists, social learning theorists, family therapists and communications psychologists."

a). Role Pathology --

"This has been typically investigated by Transactional Analysis, family therapists, and cognitive-role psychologists. The individual involved in role pathology is sending multi-level communicative messages, one level of which denies, contradicts, or circumvents another level. The individual thus possess all sorts of hidden agendas, crossed messages, confused roles, duplicitous transactions, and so on. It is the job of the script analyst to help separate, untangle, clarify, and integrate the various communicative strands involved in role-self pathology. The interior splitting of the text-self into overt vs. covert communicative engagements (or into dissociated sub-texts) is thus confronted, interpreted, and, if successful, integrated (a new and higher level of differentiation-integration)." (pp. 132-133)

b). Rule Pathology --

"One of the central tenets of cognitive therapy is that 'an individual's affect and behavior are largely determined by the way in which he structures the world.' and therefore 'alternations in the content of the person's underlying cognitive structures affect his or her affective state and behavioral pattern'. In other words, an individual's cognitive schemas, configurations, or rules are a major determinant of his or her feelings and actions. Confused, distorted, or self-limiting rules and beliefs can be manifest in clinical symptoms; conversely, 'through psychological therapy a patient can become aware of his distortions,' and 'corrections of these faulty dysfunctional constructs can lead to clinical improvement.'" (Aaron Beck, David Burns, George Kelley and Albert Ellis) (p. 133)

Fulcrum 5: (Identity Neurosis): Introspection. The formal-reflexive-introspective self and its turmoils.

"[T]he central and defining problems of Fulcrum 5 development involve... the *emergence* and *engagement* of the formal-reflexive mind and its correlative, introspective self-sense (with its particular vulnerabilities and distresses). No amount of uncovering techniques or script analysis will suffice to handle these problems, precisely because these problems involve structures that transcend those of lower levels of organization and thus present entirely new features, functions, and pathologies of their own." (p. 135)

Introspection and philosophizing seems to be the treatment modality of this level. "If the client is clearly in the introspective (not interpretive) modality, there is nothing to be lost, and much to be gained, by the therapist taking a more active role, becoming, in a sense, a co-educator or co-philosopher... [T]he therapist can engage the client in a *Socratic dialogue* which engages, simultaneously, the client's formal-reflexive mind (if, in this dialogue, lower-level residues surface, the therapist can revert to interpretation, structure-building, script analysis etc.). As with any Socratic dialogue, the particular content is not as important as the fact that it engages, activates, draws out, and exercises the client's reflexive-introspective mind and its correlative self-sense." (pp. 135-136)

Fulcrum 6: (Existential Pathology): Existential Therapy.

"As introspection and philosophizing are engaged and matured, the basic, fundamental, or existential concerns of being-in-the-world come increasingly to the fore... Existential pathology occurs if these concerns begin to overwhelm the newly formed centauric self and freeze its functioning. These pathologies include... existential depression, angst, inauthenticity, and flight from finitude and death, etc." (p. 136)

"[A] central therapeutic commonality seems to be... the *clearer* or more transparent the self becomes (via concerned reflection), or the more it can empty itself of egocentric, power-based, or inauthentic modes, the more it comes to an *autonomous* or *authentic* stance or grounding... [I]t is this *grounding* in authenticity and autonomy that itself provides existential meaning in life, that combats dread and angst, and that provides a courage to be in the face of 'sickness unto death'. Authentic being... carries intrinsic (not extrinsic) meaning; it is precisely the search for extrinsic or merely external meaning that constitutes inauthenticity (and thus existential despair). Analysis of, and confrontation of, one's various inauthentic modes... seems to be the key therapeutic technique on this level." (pp. 136-137)

"These concepts of intrinsic meaning (or an new and higher level of interiorization) and the engagement of autonomy (or a new and higher level of self responsibility) seem to be the two central features emphasized by all genuine schools of humanistic-existential therapy... [T]he self is an opening to Being, but that opening is strictly finite, individual and mortal... [T]here is nothing timeless or eternal about the centauric self, and an acceptance of that fact is part of the very definition of authenticity." (p. 137)

"[A]t this point a denial of the possibility of spiritual transcendence would constitute a preeminent defense mechanism... [A]utonomy is simply a higher interiorization of consciousness...; if this interiorization continues, it easily discloses psychic and subtle developments. The self is then no longer an opening to Being; it starts to identify with, and is, Being itself." (p. 137)

Fulcrum 7: (Psychic Pathology): The Path of Yogis.

"[T]he world's great esoteric traditions [can be divided] into three major levels: the Path of Yogis [beginning or ground], which predominantly aims for the psychic level; the Path of Saints [intermediate or path], which predominantly aims for the subtle level; and the Path of Sages [advanced or fruition], which predominantly aims for the causal." (p. 138)

"[C]ontemplative development in general possesses three broad levels or stages (beginning, intermediate, and advanced); ..different tasks and capacities emerge at each level;... different distortions, pathologies, or disorders may therefore occur at each level; and... these distortions or pathologies may best be treated by different types of 'spiritual' therapy (some of which may also benefit from adjunct conventional therapies)." (p. 138)

1). *Spontaneous* --

"For pathology resulting from spontaneous and unsought awakening of spiritual-psychic energies or insights, there seem to be only two general treatment modalities: the individual must either 'ride it out,' sometimes under the care of a conventional [therapist] who may interpret it as a borderline or psychotic break and prescribe medication, which often freezes the process in midcourse and prevents any further reparative developments; or the individual can *consciously* engage this process by taking up a contemplative discipline." (pp. 138-139)

2). *Psychotic-like* --

"For genuinely psychotic or psychotic-like episodes with periodic but distorted spiritual components, Jungian therapy may be suggested... A contemplative discipline... is usually contraindicated; these disciplines demand a sturdy ego or centaur-level [body-mind integrated] of self, which the psychotic or borderline does not possess." (p. 139)

3) *Beginning Practitioner:*

a). *Psychic inflation* --

"This confusion of higher or transpersonal realms with the individual ego or centaur can often be handled with a subtler version of 'optimal disillusionment,' a continual separation of psychic fact from narcissistic fantasies. If this repeatedly fails, it is usually because a psychic insight has reactivated a narcissistic-borderline or even psychotic residue. At that point, meditation should usually be stopped immediately and, if necessary, structure-building engaged." (p. 140)

b). *Structural imbalance* (due to faulty practice of the spiritual technique) --

"The individual should verify this with the meditation teacher; these imbalances... point up how extremely important it is to undertake contemplative disciplines only under the guidance of a qualified master." (p. 140)

c). *Dark Night of the Soul* --

"Reading accounts of how others have weathered this phase can be very helpful... In periods of profound despair, the soul may break into petitionary, as opposed to contemplative, prayer;... this need not be discouraged -- it is prayer to one's own higher Archetype..[In] the depression or agony of the Dark Night, [there are] virtually no cases of its leading to suicide (in sharp contrast to existential or borderline depressions...) It is as if the depression of the

Dark Night had a 'higher' or 'purgatorial' or 'intelligent' purpose..."(p. 140)p

d). Split-life goals --

"It is important... that one's spiritual practice be integrated into daily life and work (as a bodhisattvic endeavor)." (p. 1400)

e). Pseudo-duhkha --

"Spiritual teachers generally have no knowledge of the dynamics of borderline or psychoneurotic disorders... In most cases, the meditator should cease all meditation for a few months. If moderate-to-severe depression/anxiety persists, a borderline or psychoneurotic [unresolved experience] might have been reactivated... and appropriate structure-building or uncovering therapies might be engaged." (pp. 140-141)

f). Pranic disorders --

"These disorders are notorious for inducing hysterical-like conversion symptoms which, if left untreated, may induce genuine psychosomatic disease... They are best handled in conjunction with the yogic meditation teacher." (p. 141)

g). Yogic illness --

"The best 'cure' is also the best prevention; strengthening and purifying the physical-emotional body..."(p. 141)

Fulcrum 8: (Subtle Pathology): The Path of Saints.

1). Integration-Identification Failure --

The treatment modality for this pathology is to "engage (or intensify) the path of subtle-level contemplation (the Path of Saints), which, at this point, usually *begins* to involve some form of *inquiry*,... into the *contraction* that constitutes the separate-self sense. It is said to be an actual *seeing* of that contraction, which is blocking subtle or archetypal awareness, and *not* a direct attempt to identify with archetypal awareness itself, that constitutes the therapeutic treatment for this particular disorder..." (p. 141)

"[I]f this contraction or subtle-level resistance is not relaxed to a sufficient degree... the consolidation and stabilization of the archetypal self will not be achieved, and the individual may then be inundated and overwhelmed by the tremendously powerful energies and dynamics released in the subtle realm." (p. 142)

"The common treatment modality...include[s] *seeing* and then *understanding*... the subtle contraction or resistance to a larger archetypal awareness, a contraction that at bottom involves an inability to accept the death of the previous (or mental/psychic) self-sense and its attachments and desires..." (p. 142)

"[I]t is at this point... that one begins to encounter and understand the 'deep-seated defilements... that not only obscure the next and higher stage of formless or unmanifest awareness, but ultimately give rise to all forms of human suffering and pathology, high or low.'" (p. 142)

2). *Pseudo-nirvana* --

"This mistaking of subtle illuminations and archetypal forms for ultimate enlightenment can only be handled by moving beyond the luminous forms to unmanifest or formless cessation...! [C]hecking routines' [can] help the practitioner review the ecstatic, luminous, blissful, and 'tempting' subtle experiences and thus eventually gain a distancing or nonattached stance towards this archetypal level..." (p. 142)

3). *Pseudo-realization* --

"[T]here is usually no cure for pseudo-realization except more meditation. The only thing more painful than continuing meditation is failing to continue meditation." (p. 143)

Fulcrum 9: (Causal Pathology): The Path of Sages.

1). *Failure to Differentiate* --

"[T]his final differentiation or detachment (i.e., from all manifest form) involves a subtle but momentous collaboration on the part of the student and the teacher... described as follows: The teacher... resides within the 'Heart' (or causal/unmanifest realm) of the student, and exerts a special 'pull'; the student, in the final and root form of the separate-self sense (the archetypal self), is still standing in a subtly contracted form 'outside' the Heart (i.e., resisting the final and total dissolution of the separate-self sense). The student and teacher 'together,' through an 'effortless effort,' release this stance, and the separate-self 'falls' into the Heart. This 'fall' into formless, unmanifest cessation or emptiness breaks all exclusive attachment to manifest forms and destinies, and Consciousness as Such (or Absolute Subjectivity) differentiates itself from all objects... and from all archetypal tendencies or root contractions... Repetition of this 'fall' -- or repeated 'movement' from manifest to unmanifest and back again -- 'burns' the root inclinations and desires for contracted and separated modes of self existence. This fall is the 'entrance' to the stages of enlightenment,," (pp. 143-144)

2). *Failure to Integrate* --

"This 'ultimate pathology' (a failure to integrate the manifest and unmanifest realms) results when the root ... (archetypal forms and inclinations) are seen only as defilements and not also as the means of expression or manifestation of unobstructed Wisdom (absolute Spirit or Being). The overcoming of this disjunction and the re-union or re-integration of emptiness-form and wisdom are the 'supreme path'... where all phenomena, high or low, exactly as they find themselves, are seen as already perfect expressions and seals of the naturally enlightened mind." (p. 144)

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