

# CHANGE & PSYCHOTHERAPY: The Psychotherapeutic Process of Life Changes, Spiritual Emergence or a Soul Awakening?<sup>1</sup>

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## Abstract

Some people's transformational processes can look like or imitate psychotic symptoms. Yet these transformational processes are a natural part of the human psyche and its development. As psychotherapists, we may need to be more aware of these possibilities.

A phenomenon that is increasingly being found in some areas of psychotherapy is that of people going through a deep transformational process as a result of some sort of shock or trauma. It might be that this shock is a physical one: a car accident; a mugging; an illness; a near-death experience; or a traumatic birth of a child. It might also equally well be a more of a mental or emotional shock: a loss of faith; discovering one is an alcoholic; or that you were abused as a child; a psychotic episode; a psychic experience; or that your life-partner has been dishonest or unfaithful.

For the many people who experience these, such events are shocking and, after a while, the person works through it, or seems to get over it, for the most part. Life then continues relatively (seemingly) as normal. For some however, these self-same events are the trigger that starts that person off into a process of deep and powerful change. This is not just a personality change, but it is more like a fundamental change of life, direction, and (possibly even) belief systems. In itself, the event is significant, but the real significance is more in the underlying process that results from it, or emerges from it. *"It changed my life"*, is the common report. Yet we do not often (except perhaps with marriage and childbirth) welcome these developmental changes; nor do we see them as particularly significant in our maturation; nor do we even recognise them for what they really are. Like most people, we try to avoid them because they are uncomfortable, or unpleasant, and we try to restore the "status quo" – even though we know this is unsustainable. This is where the role of the psychotherapist can be crucial.

It is useless to point out to the person that others have experienced a similar event and not had this reactive 'process' experience: as this can sometimes make the person feel worse. It is also fairly useless to deal merely with the symptoms of this process of transition or change, as the symptoms are not necessarily directly related to the underlying fundamental process. Instead, it is often better to help affirm the person's process – for whatever it is – as a process of change, and perhaps encourage them to move forward with that change.

### **Case History 1:**

A medical doctor, about 40 years old, went for a week's visit to a nearby spiritual community that he had heard of and, whilst there, he had a very strong 'insight' that he should take up his love of music much more full-time, especially since his profession of medicine (whilst it had been totally involving up to that time) was becoming less and less of an interest to him. He had been playing in a band on occasional weekends and evenings. He was also married, his wife was a doctor as well, and they had two children. On his return home, he embraced this change of interest enthusiastically, which began to cause quite severe difficulties with his professional practice, his medical partners, and also in his home life - and this change became to be viewed generally with much suspicion. The opposition around him towards what he felt was his now 'life interest' and more an expression of his 'true self', possibly increased his resistance and exacerbated his enthusiasm, and he became quite manic. The situation deteriorated quite quickly and he ended up being diagnosed as having a 'break-down' and he was "sectioned"<sup>2</sup> into a local psychiatric hospital.

I became involved at this point (only), when he rang me up and asked me to help him fight the 'Section' by faxing information about these types of 'spiritual emergence' process. He had got my name and number from someone in the spiritual community. I had never met him before. I duly faxed him an article I had written on these processes, with some reference material, and pointed out these processes were now recognised in the DSM-IV<sup>3</sup> as a "Religious or Spiritual Problem". I also advised him to 'play it cool', make his 'point' that he was not crazy, but also try not to 'fight' the system, as he had wanted to. I am not sure whether this helped his case or not.

However, after a reasonably short period (about 10 days), and when (in the eyes of the psychiatrist) he had 'stabilised' on the medication he was being given, the 'Section' was dropped. He returned home, and eventually went back to work as a doctor, but in a more administrative capacity, for a while. However, in the interim because of this 'crisis', his marriage had broken down completely, and his wife began divorce proceedings. She seemed to be deeply shocked and affected by the lack of stability and his seeming lack of concern for what had previously seemed to be important: career, family, etc. He had maintained his interest in music throughout the whole process and had especially started writing songs for the guitar. He was quite a skilled player up to then though he had done little composing, but this song writing had become new creative outlet for him, especially whilst confined. These songs often had a 'New Age' or spiritual component, and seemed to just "come out" from somewhere inside him.

He then met a woman with a similar interest at a local “gig”, they started seeing each other, and she soon became his new partner. She gave up her well-paid and high-powered work in a bank to join him and to help to promote his/their music. He resigned from his practice, and they moved to a different European country (where she had lived previously) and increased their song-writing & production output, their range of music, and the standard or quality of their music. The last I heard was that they seemed very happy in this situation, albeit somewhat less financially secure, and in less prestigious professional positions. Their lives had changed.

### **The Process of Change**

As a psychotherapist, I am often concerned or involved with people's ‘life changes’. One reason is that, not only does the individual often need quite a lot of help, counselling and support during parts of this transition, or with the often stormy passage of change, but also some of the symptoms that a person evidences during this process can sometimes look very like some psychotic symptoms. Perhaps there is little observable difference between the process of someone changing suddenly and quite radically and someone going crazy. I am absolutely sure that many times (as in the case history above) a person going through a transitional experience has been diagnosed as psychotic and treated as such, often for the rest of their lives, and possibly with subsequent permanent damage from inappropriate medical / psychiatric treatment. It is only very recently, and only as a result of pressure from people like David Lukoff and Stan Grof, was DSM-IV (the American psychiatric classificational diagnostic) amended to include a "spiritual crisis" as one of the possible origins of manic or schizophrenic symptoms, under the heading "Other Conditions That May Be a Focus of Clinical Attention: Code V62.89".<sup>4</sup>

It seems difficult for a society to recognise the processes of change within people within that society: if you want to change the ‘system’ – in whatever way it affects you, then you are a nuisance, crazy or insane, a misguided hippy, on drugs, a revolutionary, a heretic, a communist, a terrorist, or something similar: to be ignored, excluded or punished.

Please consider, as a fantasy, for a moment, a society which (say) does not recognise puberty as a healthy stage of development. This society has become "stuck" – for some reason – in its childhood. Pre-pubertal “norms” are the ideal state. Puberty and adolescence becomes therefore an aberration. The changes in female body shape thus become strange and disgusting distortions that need corrective surgery. The growth of facial, underarm and pubic hair is therefore seen as weird and obnoxious, needing instant depilation. Adolescent spots are treated as a serious skin disease, possibly on a line with the 'buboes' of the Black Death. Puppy-fat is viewed as a moral degeneracy, corrected by only a regime of starvation. People with this "illness" who protest that, it

is, not them, but society, who is “sick” threaten this ‘world-view’ are therefore excluded or locked away.

I use this analogy because it illustrates what might happen if society rejected a normal physical developmental and maturational process. Here, in this article, I suggest that our present society, for all of its wisdom and ‘civilisation’, treats the maturational or developmental process of the psyche in a similarly disrespectful and abusive way.

For people in more ‘primitive’ societies, it is often a ‘given’ – and it is clearly embedded within the structure and workings of that society – that some people, perhaps not all, will go through a significant transformative process. The society needs these people: to give to that society their guidance and wisdom; to interpret the world of the spirits; to act as healers or priests and priestesses. These people will probably then be sent to become trained up as the next witch doctor or shaman. The book, *Black Elk Speaks: Being the Life Story of a Holy Man of the Oglala Sioux*, describes how, as a boy, he had a “big dream”, a dream for the tribe, and at various stages in his life he got the tribe to “act out” the dream (Neihardt, 1988). His brought the meaning of the dream into a collective understanding. The Dalai Lama, and the other recognised incarnations, act in something of this role in the former Tibetan society. The symbol of the lotus (also symbolising divine beauty and purity) enshrines this spiritual process in Hinduism and Buddhism as the unfolding petals symbolise the opening of the soul.

The lotus in both Egypt and India symbolizes the union of the four elements; earth, air, fire, and water. The roots are in the earth, it grows in and by means of water, its leaves are nourished by air, and it blooms through the power of the sun's fire. The lotus is therefore the perfection of the fourfold order of the natural world. The growth of a new flower directly from the earth-bound original (inflorescent proliferation) may be interpreted as a symbol of transcendence as found in Indian philosophy: a spiritual emergence of a higher world directly from our physical manifestation. It may also be interpreted, as in Egypt, as the exaltation of the essence quality of the lotus. (Lawlor, 1991)

Some of the “social dreaming matrix” processes that came out the Institute for Group Analysis could also be seen as something similar to this. Arnold Mindell (2000) describes how he works on this level in what he calls “World Work” and in *Dreaming While Awake*.

Often the problem is caused, not by the process of transformation, but because the process is not accepted by the surrounding society. In a parallel to the case history of the musical doctor mentioned above, Gauguin (a Victorian French stockbroker) was vilified when he gave up his respectable job, and left his family, in order to paint full-time. He felt he had to leave “everything that is artificial and conventional” and go to the other side of the world (eventually Tahiti) in order to paint, especially in the primitive style, and with the colours with which he saw the world.<sup>5</sup>

Earlier, I used the phrase “maturation” or “development” of the “psyche”, however Stan & Christina Grof (Grof & Grof, 1989 & 1997) have described this type of transformative life-change as a “Spiritual Emergence” – and this term has caught hold a little; others have used the phrase “Soul Awakening”; for there is frequently - if not inevitably - a new interest in spiritual and religious matters. In an article on this subject (Young, 1995), I defined this process as:

“becoming aware of an intimate and regular contact with the higher part of ourselves or that which is greater than ourselves, and an increasing dedication to live one's life toward serving that principle rather than our personality; a wish to surrender to the spirit in the moment as well as during major life crises.”

However, if the “process” is not recognised, or if it is rejected (often by the people around or by mainstream society), then, instead of an “spiritual emergence” process, it can turn into an “spiritual emergency”. That is when help may be needed, and that is the sort of phone call, like the doctor’s one, that I used to get – and still do occasionally. Nowadays, through the Internet, there are better links to ‘Spiritual Emergence Networks’<sup>6</sup> and there are many more books, papers and articles on these topics.

### **Types of Process**

There are a number of different and various manifestations of this type of process. Grof lists various specific types that he has discovered based on his researches. He has categorised many hundreds of accounts into 10 categories. These are described more fully in his books, but include ‘Shamanistic Experiences’, ‘Psychic Openings’, ‘Near-Death Experiences’, and ‘Kundalini Awakening’ (where the bodily symptoms of tremors and shakings, hyper-sensitivities, hot & cold flushes, waves of emotions and feelings, all sometimes quite violent, predominate). They also include some of the more bizarre ‘Past Life Experiences’, possible ‘Encounters with UFOs’, even ‘Demonic Possessions’ (which thankfully are very rare), as well as a ‘Synthesis of Forms’. I would also like to include a few other categories wherein the spiritual emergence process can take place (or go wrong) and these are some that I have worked with: Addiction & Drug Dependencies; Social Forces – where these processes are ‘acted out’ on a wider level (viz: the 1989 collapse of the Iron Curtain and the Soviet hegemony); an actual Psychotic Episode can be part of a spiritual emergence process; a major illness or accident; a direct Religious Experience (such as being touched by the Dalai Lama) or a Religious Conversion; a Ritual Initiation; ‘Burn-out’, Chronic Fatigue Syndrome, or Myalgic Encephalomyelitis; and ‘Normalcy’ – for I am sure that many people, in many different cultures, go through this sort of process without having to have a transformative crisis.

### **Case History 2:**

Some years ago, an American man, of about 45, came to a week-long workshop on 'Deep Ecology'<sup>7</sup> with Joanna Macy at the Findhorn Foundation, where people were encouraged to express what they imagined was the pain and suffering of the earth and animal species in relation to the pollution and devastation caused by humans. This man had been a successful businessman from the north-west of America who had sold out his office furniture stores after a divorce. He was then looking around for a different purpose in his life and became attracted by some of the New Age workshops about re-finding your Self and the environmental movement. He had become increasingly distressed about environmental pollution, identifying deeply (perhaps too much so) with some of the vanishing species. And pristine landscapes

During the workshop, he became quite agitated, and stayed up all through one night ending up quite manic. He was built like a lumber-jack and he was very strong. Early that morning, he scared the workshop leader when he saw her walking in the garden before breakfast, and went up to her, fell to his knees in front of her, and clutched her round the legs, saying, "Tell me how to save the World!"

Throughout the morning, he was still quite agitated. Many people wanted him to be "taken away" out of the workshop – possibly to the mental hospital, or a different part of the community, or anywhere away from them and their processes, etc. A few of us managed to contain the situation for a while, walking with him quietly in the woods – but the agitation persisted throughout the day. Eventually, I took him to the place where I was living, where he could stay quietly, without disturbing anyone else and 'under my supervision'. I gave him a book to read: a copy of Emma Bragdon's (1984) book on Spiritual Emergencies. He woke me up in the middle of the night: *"Oh I've got symptom and I've got that one. So that's what is happening to me. O.K. I can understand all this now. I'm all right then: I'm not going crazy."* It was partially his fear that was making him manic. Later that day, I took him to one of the local doctors, who I knew, and (partially on my say-so) he was prescribed some Diazepam as a temporary patient. He stayed for a few days longer to integrate his experience, and then caught his scheduled flight home. The crisis was over, and the 'break-through' happened with his understanding. After that, in the next few years, he wrote nine small self-help books for people having a crisis. Many of the sentiments in these books, though not the language (as they were written for ordinary business people), had a spiritual flavour.

Whilst there was a crisis, thankfully it didn't last that long and was reasonably contained within the environment and because of my understanding and experience. What he really needed was his understanding of the process. Then he could handle it himself. If, however, the environmental reaction, or the therapist's reaction had been different, the process would have

almost certainly ended in hospitalisation and medication, with him missing his flights back to Seattle. When I visited the Pacific West Coast of America a few years later, I met up with him and he took me round the Olympic peninsular. We stayed one night in an old Indian village and met a guy there who was a shaman, and so I had a little spiritual ‘encounter’ or ‘opening’ of my own. Once you start on this sort of transformational journey, almost ever encounter can become quite significant. You certainly get to meet some very interesting people, in some very interesting places, doing very interesting things.

### **Extraordinary People:**

In a book by Peiro Ferrucci (2009), he studies the lives of more than 500 people - Einstein, Schweitzer, Thoreau, Monet, Isadora Duncan, Maria Montessori, arctic explorer Robert Peary, and the mystic Jacob Boehme, amongst them – all with exceptional capacities, and synthesises their experiences into various transformative ‘ways’, like the Way of Beauty, the Way of Illumination, the Way of Devotion. In so doing, he indicates the different paths of developmental processes that these exceptional people have undergone and also states, quite categorically, that these ‘ways’ are our potential as well. He writes:

“As one proceeds along a Way to the Self, one comes into contact with an entirely new realm that transcends the confines of individuality – (this is) the transpersonal level.”

“Encountering this world can be an ecstatic experience, but it can also upset the mental balance of someone who is not prepared for it.”

I venture to suggest that this sort of process happens much more frequently than we might imagine. A person, who is having a break-through, perhaps into their greatness, often instead might have a break-down, perhaps into psychosis, especially if their process is not correctly identified, by either themselves, or by those around them. We may therefore be seriously limiting the potential of such people that we come across in such states, if we do not help them *with* their process, rather than to try and stop it, and – short-sightedly help them to ‘get them back to normal’.

There is an archetypal story of a psychiatric patient, coming out of an asylum, who happens to see a guru, sitting naked under a tree, with lots of people listening to him. He asks the guru, “*What are you doing that is different? When I did that, they locked me up in there.*” The guru said, “*It all depends on who you talk to?*”

Nicola Kester, an ex-coordinator of the Spiritual Emergency Network, a world-wide network of therapists and resources to help people in such situations, differentiates it like this:

The difference also in the spiritual emergence experience is that, ideally, it leads to increased creativity, feelings of peace, an expanded sense of compassion, and I would

say, healing and compassionate action in the world. .... Spiritual Emergency, as defined by (Emma) Bragdon, is "*disorientation and instability that result from intense spiritual experiences which overwhelm the individual's ego functioning and for which there is no social or cultural support.*" (Kester, 1985)

The best thing we can do, as people, and for others in these processes, is not to judge too quickly. Within our work in psychotherapy, we might have to learn new tools, languages and structures that go beyond the purely biographical, or the intellectual, or the behavioural. The material is there, mainly in the spiritual writings through time, like that of Hildegard of Bingen, or in the Upanishads, or the Tao Te Ching. Closer to home, The Journal of Transpersonal Psychology has been going many years. Other people have been writing about these processes, or journeys, of transformation. This does not have to be 'New Age' or airy-fairy stuff: Leonard Cheshire, a much decorated RAF bomber pilot in WWII, was reading a small book one night after the death of a friend. From that, he converted to Roman Catholicism, and then dedicated the rest of his life towards setting up the Leonard Cheshire Disabled<sup>8</sup> homes, originally for ex-servicemen and women, later for anyone.

David Lukoff, writing in an article entitled "*The Myths in Mental Illness*" (Lukoff & Everest, 1985), suggests that when we take this journey, we begin to experience the world from a different perspective; that of a more archetypal mode. Our world begins to get 'peopled' with Gods and Demons, Myths and Legends, Dreams and Nightmares, Wondrous Beings or Monsters. We may see ourselves in these shapes, and we may also see others like this. Actions take on a deeper significance like that which they often carry in myths: forgetting to change the sails of one's ship from black to new white ones can mean the death of your father; or a chance-encountered object (like a ring) means the possibility to defeat the Enemy. If this world of myths is not understood, it can bring a lot of fear with it, as well as a lot of beauty. Normal rational thought plays little part in these realms.

For example I remember that, during such a period in my own life, after reading D.M. Thomas's modern classic '*The White Hotel*' (Thomas, 1982) not only did I seem to start to be surrounded with the most incredible 'electrifying' eroticism emerging from mundane objects, but with the juxta-position of extreme violence, I also became terrified of the tunnels that linked the different London Underground platforms, for it seemed as if all these crowds of people (and myself) were being funnelled to some horrific end - like that of Babi Ya<sup>9</sup>, described in the book. Paranoia and psychosis indeed, or perhaps! Well, that is the issue.

And yet we must also live in the world, maintain our career and practices, pay the mortgage, raise a family, meet publishing deadlines, give to others, etc. It is a classic "*both ... and ...*" situation. As the Zen 'koan' so rightly says: "*What did you do before enlightenment?*" "*I chopped*



*wood and carried water.*” “*What did you do after enlightenment?*” “*I chopped wood and carried water.*” We need to stay grounded, centred and also maintain the process within us. We may need help with understanding or protection from those around us.

Let me give another example: an elderly lady in Texas rang up an SEN<sup>10</sup> referral service in California some time ago and said, “*Can you help me? Last Christmas, God came and sat in my head.*” When asked what she meant by that, she said, “*I seem to know things that are going to happen before they happen and I get messages telling me what to do and what is happening with other people. I know what people are thinking. ... Now, my Minister says that I am of the Devil and my women's group at the Church say that I am a witch, and my husband, well, he just doesn't want to know anything about this at all. So can you help me?*” She was referred to a counsellor, who was aware of some of the aspects of these processes. She already knew what it was, and was not afraid of it: “*God came and sat in my head*”. The problems she was having was with those around her, and especially those people who should be supporting her and seeing her through the process.

So I would like to reinforce the importance of a more general acceptance of this type of process. Our society's fears about mental illness and the horrible social stigma that surrounds it can blind us to some of the other possibilities that can exist ‘on the fringes’ of so-called mental illness. I am NOT against psychiatry and the safe, and sometimes even respectful, care that is found in many mental wards and psychiatric hospitals. But I am in favour of supporting a wider framework where some of these potential areas can be more widely recognised and more creatively worked with. This is happening – very slowly.

The psychiatrist, R.D. Laing was one of the first modern mental health professionals to consider serious alternatives. He set up the experiment at Kingsley Hall<sup>11</sup>, as a place where people could go through what looked like psychotic episodes without electric shocks or medication, if they wished. Some of this aspect of the work of the Philadelphia Association developed later into the Arbours Association<sup>12</sup> community in North London. There are (and have been) other similar residential therapeutic communities with similar outlooks on “mental health breakdowns as a healing process”, like Lothlorian<sup>13</sup> in south-west Scotland; or Therafields<sup>14</sup> in Toronto; Diabysis set up by John Perry in San Francisco; Soteria in San Jose; Burch House in New Hampshire, the Wellspring community in Western Connecticut,<sup>15</sup> and the Windhorse Community<sup>16</sup> and Guild in Boulder. Some of these emphasised the spiritual components, others (like the one below) didn't, but that does not mean that it was not present, embedded in its core values:

The Windhorse method of treatment stems from two central principles. First, that each person is fundamentally healthy and sane and that a mental disorder exists as a secondary overlay to that sanity. Second, that a person's health is inseparable from that

of the environment. This leads to a treatment model that treats a condition within a healthy and supported environment. This environment is considered to be the physical domestic life, interpersonal relationships and emotions, and the mind that includes thoughts, attention, and the general sense of personal presence and meaning. The treatment is carried out by a team that works with the patient through domestic activities while implementing healthy life rhythms and providing warm, empathetic relationships. (from Windhorse Guild website)<sup>17</sup>

Unfortunately some of these communities were fairly short-lived, many only flowering in the fertile 'alternative' environments of the 1980s, like many of the progressive residential drug treatment centres. Yet this is a long-term recognised 'movement', dating back to Homer Lane's work in the Little Commonwealth in Britain in the immediate post-war era. He influenced A.S. Neill, Montessori, Steiner, and many others. They have influenced more modern developments in their turn:

Laing, and other members of the Philadelphia Association he established, both influenced and in turn, were influenced by, patient-led movements such as People not Psychiatry (PNP) and the emergent Italian movement, *Psichiatria Democratica*. These were movements that brought together mental health patients, radical health workers and social and political activists in a common cause to promote 'community healing' outside the established, hospital-based psychiatric traditions. (Yates, 2003)

Many others have followed this sort of example; excellent examples have come and gone; there have been waves of interest, followed by lapses, disinterest and oppression; there are many books and articles, and yet this is still also a poorly recognised field - even amongst the professionals, and especially amongst the professionals. Yet the recognition of spirituality and spiritual treatment processes within the traditional mental health field does exist (Swinton, 2001). As professional psychotherapists, it is perhaps also worth our while to extend our awareness, and to include this "spiritual emergence" process as a possibility, when considering someone who seems to be in a fairly extreme state, and yet is also quite lucid.

For many years and on many occasions, people have been mistaken in their diagnoses. There are many well-recorded incidences where conditions such as: toxic brain pathology in reactions to local anaesthetics; reactions to withdrawal of Valium; temporal lobe epilepsy; vitamin B12 deficiency; allergic reactions to wheat or rye (especially if this has been distorted by a virus); prolonged sleep deprivation; sensory isolation phenomena; allergic viral encephalitis; post-traumatic stress disorder; or the taking of psilocybin mushrooms, etc. have all produced symptoms that both subjectively and objectively are almost indistinguishable from hallucinogenic intoxication, or psychotic experiences. In other words, many varied things can cause one (or the person in front of you) to 'seem' absolutely crazy. It is also very easy to add a spiritual emergence

process to this list, especially when one reads of peoples' direct experiences of their transformative processes.

### Author

**Courtenay Young** was the residential psychotherapist at the Findhorn Foundation, a spiritual community in north-east Scotland, for about 17 years (1986-2003). During this time, he developed principles of working with people in Spiritual Emergency processes. These were put into a manual for the community, *First Contacts with People in Crisis*, which is available on his website, [www.courtenay-young.com](http://www.courtenay-young.com).

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### Endnotes:

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- <sup>1</sup> This article was originally published in a much shorter version as a chapter on Psychotherapy in Featherstone, C. & Forsyth, L. (1997). *Medical Marriage: The New Partnership between Orthodox & Complementary Medicine*. Findhorn: Findhorn Press.
- <sup>2</sup> “Sectioned”: An involuntary commitment: being retained under a Section of the Mental Health Act in psychiatric hospital against one’s will: In the UK: involuntary commitment is informally known as *sectioning*, after the various sections of the Mental Health Act 1983 (covering England and Wales), the Mental Health (Northern Ireland) Order 1986 and (nowadays) the Mental Health (Care and Treatment) (Scotland) Act 2003 that provide its legal basis. (ref: accessed Wikipedia 17/09/09: [en.wikipedia.org/wiki/Sectioned#United\\_Kingdom](http://en.wikipedia.org/wiki/Sectioned#United_Kingdom))
- <sup>3</sup> DSM-IV: Diagnostic and Statistical Manual of Mental Disorders #IV, published in 1994 by the American Psychiatric Association providing diagnostic criteria for mental disorders.
- <sup>4</sup> Transpersonal Psychology: Wikipedia [http://en.wikipedia.org/wiki/Transpersonal\\_psychology](http://en.wikipedia.org/wiki/Transpersonal_psychology) (accessed 17/09/09).
- <sup>5</sup> “The Moon and Sixpence” by W. Somerset Maugham is based on the life of Gauguin. (Maugham, 2008).
- <sup>6</sup> Spiritual Emergency Networks (SEN): internationally: [www.atpweb.org/TranspersonalInternet.asp](http://www.atpweb.org/TranspersonalInternet.asp); in the USA: [www.spiritualcompetency.com/se/resources/senciis.html](http://www.spiritualcompetency.com/se/resources/senciis.html); in the UK: [www.spiritualcrisisnetwork.org.uk](http://www.spiritualcrisisnetwork.org.uk); in Australia: [www.spiritualemergence.org.au](http://www.spiritualemergence.org.au); for the history: [www.ahastories.com/spiritualemergen.html](http://www.ahastories.com/spiritualemergen.html).
- <sup>7</sup> Deep Ecology: a term that was coined by Norwegian philosopher Arne Naess to contrast with ‘environmentalism’ which has purely human interests: (accessed 17/09/09: <http://www.joannamacy.net/html/deep.html>)
- <sup>8</sup> see Leonard Cheshire Disabled: Wikipedia, (accessed 17/09/09: [http://en.wikipedia.org/wiki/Leonard\\_Cheshire](http://en.wikipedia.org/wiki/Leonard_Cheshire))
- <sup>9</sup> Babi Yar: The most notorious massacre of Jews in the Soviet Union took place in a ravine called Babi Yar outside Kiev, the capital of Ukraine, where 33,771 Jews were killed in a single operation on September 29–30, 1941. (Wikipedia: accessed 17/09/09: [http://en.wikipedia.org/wiki/Babi\\_Yar](http://en.wikipedia.org/wiki/Babi_Yar))
- <sup>10</sup> SEN: Spiritual Emergence Network.
- <sup>11</sup> Kingsley Hall: In 1965, R. D. Laing and his associates in the Philadelphia Association asked to use the Kingsley Hall Community Centre, in the East End of London, as the location for one of the most radical experiments in psychology of its time. The aim of the experiment was to create a model for non-restraining, non-drug therapies for those people seriously affected by schizophrenia. ... Based on the notion that psychosis, a state of reality akin to living in a waking dream, is not an illness simply to be eliminated through the electric shocks favoured in the Western tradition of the time but, as in other cultures, a state of trance which could even be valued as mystical or Shamanistic, it sought to allow schizophrenic people the space to explore their madness and internal chaos. (Wikipedia: accessed 17/09/09: [http://en.wikipedia.org/wiki/Kingsley\\_Hall](http://en.wikipedia.org/wiki/Kingsley_Hall))
- <sup>12</sup> Arbours Association: <http://www.arboursassociation.org/> (accessed 19/09/09)
- <sup>13</sup> Lothlorian: started in 1974, since 1989 it has been run by the Rokpa Trust, a branch of Samye Ling Tibetan Centre: Website: <http://www.lothlorien.tc/> (accessed 19/09/09)
- <sup>14</sup> Therafields, Toronto: <http://definitions.therapytoronto.ca/therafields.phtml> (accessed 19/09/09) and <http://www.northwordbound.ca/2007/12/15/part-five-a-brief-history-of-therafields/> (accessed 19/09/09)
- <sup>15</sup> Diabysis, Sotoria, Burch House, Wellspring: <http://www.spiritualcompetency.com/dsm4/restx.html> (accessed 19/09/09)
- <sup>16</sup> Windhorse Community: <http://www.windhorsecommunityservices.com/> (accessed: 20/09/09)
- <sup>17</sup> Windhorse Guild: <http://www.windhorseguild.org/about.html> (accessed: 20/09/09)