

Soul Consciousness and Human Suffering: Psychotherapeutic Approaches to Healing

Dr. Andrew Powell

Abstract

A clinical approach to the understanding of disturbances of the psyche that otherwise would be regarded as pathological states of mind is described. A parallel is drawn between psychoanalytic object relations theory and "spiritual object relations," working from the premise that mind comes before matter. A number of clinical examples illustrate how both psychological and spiritual interpretations may be applied and that highlight the need for psychiatrists to be open to the transpersonal frame of reference.

In this article, I am working from the basic premise that an experience of wholeness is to be found at the heart of every therapeutic success.

What does this word wholeness presuppose? The *Concise Oxford Dictionary* tells us that the root of the word means none other than "health" or "healing." So it seems that long before sociologists started debating the meaning of terms like illness and health, we find a simple answer in the history of our language.

The human being has a natural sense of when he or she is integrated, whole, in harmony with self and, it usually follows, with others as well. It is ancient knowledge, laid down in our prehistory, so that we were born with it and seek it instinctively throughout our lives. Our ancestors were no fools and knew without the help of science that wholeness makes for health. Studies of infant development show that in the state of contentment, which is how a normal baby spends a good deal of its time, the infant spontaneously reaches out to mother with its eyes, hands, mouth, and voice and enjoys an exchange with her in which the mirroring of loving and tender gestures form a sign language (Winnicott, 1960). It is a harmonious process during which the infant learns to distinguish self from other and to go on to establish its own internal world. We call this extended phase of development the psychological birth of the child and where harmony has prevailed, the result is a flowering of the psyche in which love and joy are free to find expression.

This is how nature and nurture go hand in hand. Adult individuals who are able to respect and value themselves owe much to the internalisation of good parenting that has gone on before. At the same time, those life-enhancing interactions have been laid on a foundation of wholeness of being which was there from birth, indeed I would say from the moment of conception. You have only to look into the eyes of a newborn child to know what I mean.

There is no reference to wholeness or healing that I have come across in all of Sigmund Freud's written works, which some people might find rather odd coming from the father of psychotherapy. In contrast, Carl Jung was very much concerned with wholeness. It is the life task of what he called the individuation process, in which wholeness is forged from the integration of

opposing forces within the psyche. It is the natural development of the second half of life. Strengths and weaknesses can be weighed in the balance, mistakes owned, lessons learned, and the fruits of life's labour harvested.

As with the uroboros, the snake with its tail in its mouth, symbols of wholeness are to be found throughout the history of mankind, in the archetypes of the collective unconscious, the mandala, the Christ archetype, and indeed for each one of us, the individuating Self as archetype. The source of all archetypes, the soul, was called by Jung "the living thing in Man, that which lives of itself and causes life" (Jung, 1959).

How might the concept of the soul be placed within the earthbound psychology of child development? The patient who comes along suffering those all too frequent twin emotions of hatred of self and envy of others must surely have once had an experience of wholeness, perhaps only at the very outset, but sufficient enough to be left painfully aware of what has been missing ever since. That unfortunate person has suffered a double blow, for not only did the damage inflicted by a childhood of misery and neglect result in a failure to internalise good parenting, it also caused the growing child to lose contact with its own original soul nature. Such deeply wounded patients cannot imagine how they will ever overcome the brutality of their own early life experiences.

As analytic psychotherapists, we are often trying to help our patients who have been emotionally severely traumatized to establish what we call healthy internal object relations. This rather ungainly term describes the state of a person's inner mental world in which the childhood relationships with parents and significant others continue to influence how we think, feel, and act, although this may not be taking place consciously. (The word object simply serves to differentiate the significant other from self, or subject).

The problem is tackled in psychoanalytic therapy by creating a new start, a metaphorical return to the breast. But the danger arises of a deep and lasting dependency on the therapist, most likely to happen if the therapist joins with the patient in believing that the integration of the psyche that is now being attempted is taking place for the very first time. The therapist participates in an illusion in which he risks becoming the idealized parent and a severe regression *on* the part of the patient is liable to occur. Such a distortion of reality can be very powerful and we can see its worst effects in the power of the cult.

The situation is quite different if the starting point is to help the patient discover that an awareness of wholeness is the birthright of every human being and that while the soul may have been obscured, it cannot be destroyed. The therapist's task is to guide this process of enabling the patient to make contact once again with the enduring nature of his own soul and so to be restored from within.

The great advantage is that instead of the patient always struggling to go forward, much as Sisyphus was condemned forever to roll his boulder uphill, it becomes possible to rest in the mind, as Buddhists like to say, and see what emerges. This is no regression to the helplessness of babyhood but a reconnection with what is sometimes called the perennial wisdom.

The approach I describe in my clinical examples is very simple and therein lays its therapeutic strength and immediacy. It is based on the knowledge that the soul finds direct expression in human consciousness the

same the world over. In contemplation, meditation, and quiet reflection, regardless of culture, we are intuitively drawn to images of beauty, truth and peace.

When we directly engage the soul in therapeutic work, we find ourselves in an expansion of reality that I like to call spiritual object relations. The drama of the internal object world that we know so well from life in the body is no less lively in spirit. The psychoanalysis of object relations has demonstrated that human beings are born object seeking, behaviour that continues throughout life. Consider then the possibility that in life, we are simply continuing to feel and act on what we know already as souls, the joy of union with another. In spirit, the union is, naturally enough, with the supreme soul, the Godhead.

This brings me to a further implication of spiritual object relations, that not only in spirit but also during our lifetimes we can connect with each other soul to soul. Most people get a glimpse of this when they first fall in love. But the condition is temporary, anxiety driven, and highly eroticised. Before long, the ego demands of each person come into play and the pleasure in giving is supplanted by the need to take. "Falling in love" always winds up as an idealization, and suffers the same fate, because it is entangled with the ego.

In contrast, soul love gives and receives selflessly. It has the quality of agape and because replenishment from the supreme source is always on hand, only an open heart is required. Unfortunately, most of us have trouble in keeping an open heart because our egos get in the way and as far as our work goes, it is a good thing that the therapeutic task helps us keep our focus on the patient's needs rather than our own.

From the perspective I am taking, our physical universe can be viewed as just one space-time dimension nested within other dimensions of a non-physical nature. Mind, and its individual spiritual essence, soul, is non-material but interfaces with the physical brain.

I won't debate here the philosophical and scientific evidence to support my claim. I like to think that we will never entirely penetrate this mystery from within the incarnate life form. What may be less contentious is the idea that mankind is participating in one giant holoverse, to use David Bohm's term, in which the structure of the part always reflects the whole (Bohm, 1980). It is no surprise, therefore, to find in the spiritual universe the same patterns of relatedness that we know from our experience of the human situation, with one crucial difference; there is knowledge of the whole and with it a joyousness that is rare here on earth.

It will by now be evident that I think Freud got it wrong in supposing that our search for the Almighty arises merely from a neurotic projection designed to shield us from the fear of death and oblivion. It is to my way of thinking rather the reverse. Much of the existential loneliness that arises in a lifetime is because of the painful separation from the supreme source from which we came. The therapeutic task is to help bring the mind, through a process of active imagination and reflection, to a heightened awareness of that relationship and to take strength from it.

The Godhead can, of course, be experienced as Light, or directly through the Cosmos itself. But I find that when working therapeutically with spirit, we first generally give shape to the experience by way of meeting with

discarnate souls in human form. However, in one example I shall give, divine love flows from a puppy, in another, from a mountaintop.

Before I leave these islands of theory for the open seas of the real world of our patients, I must add a few words about what Jung called the "shadow." The term refers to those denied and unwanted parts of the self, as contrasted with the "persona," the face we show to the world and that gains us approval. In every modern culture there is found a shadow half, which is dealt with either by repression, or split off and projected elsewhere. The Cold War was an example of nations mutually projecting their collective shadows. We have all come across scapegoating, and if we are honest, we must admit that we are generally intolerant in others of what we dislike most about ourselves. This is why our enemies have so much to teach us; they hold up a mirror to our reluctant gaze.

Wholeness and healing call for those negative passions to be owned. Dig deep, and love and hate stand together in all of us. The paradox is resolved not by suppressing the shadow but by recognizing it for what it is, part of the Self, and learning how to contain it so as not to hurt others. Yin and yang are now balanced, the conflict of emotions subsides, and there is a surge of energy and creativity.

This precious opportunity is given to us by way of the drama of human emotions that can only take place in the body. Otherwise, it seems to me that we might as well have stayed in spirit. When we do manage to transcend the pull of opposites, which so often tear us apart, we can see that ultimately everything is for the good. From the point of view of soul, there is no such thing as a bad experience. But how hard this is to accept when suffering the pains of the body and its emotions!

Our patients come to us because this is where they have got stuck. We can use the idea of a seesaw on the tilt, so much so that one end has jammed in the ground. Working with Spirit brings an experience of love and wisdom that frees the seesaw. Anger and grief are not abolished, but they are now in balance, situated within a larger whole.

Turning to the clinical work I want to discuss, there is one proviso I have to make, that as a psychiatrist one must be on the look out for signs of mental illness. Unfortunately, that is just about all most psychiatrists are taught to do. In my view, there is over-diagnosis of depression especially, leading to excessive reliance on medication. Take the epidemic prescribing of Prozac, as a case in point. Underlying problems get overlooked and with it a valuable opportunity for deeper exploration.

Where a psychotherapeutic approach of the more usual analytic kind enables the patient to find a new understanding within the framework of childhood, family, and personal relationships, then there can be a new beginning. This is the bread and butter of my own daily work and it is often sufficient. Other times, the darkness is so dark and the questions so big that the very meaning of life and death, what it is all for, and why we are here, have to be faced head on.

Now I am certain there is no such thing as death except leaving the body behind like a suit of old clothes. This belief is based on my own spiritual practice and in recent years has been supported by a number of studies on near-death experiences. But I am a psychiatrist, not a priest, and in the setting in which I work it would be wrong to wear my personal beliefs on my sleeve.

Instead, where appropriate, I begin by asking my patients if they believe that life truly begins with birth and ends with death. Perhaps it is because the people who come to see me have already run out of answers to their problems and their bravado has long gone, but not one has yet said that for sure there is nothing more to life than that.

Joan came to see me after the death of her husband, Ted, having nursed him through a long and debilitating illness. They had been together some 40 years and her loss had left her stricken with grief. Each new day was a living nightmare. She continually felt Ted's presence around the house but it only brought her pain. Yes, it was possible that life after death continued on in same way, but how could that help her now? So I asked Joan if she would like to try to make contact with Ted in a way that might help bring her peace of mind.

At my suggestion Joan shut her eyes, relaxed, and was encouraged to see if she could "find" Ted wherever he might be. After a couple of minutes, a faint smile played on her lips. I asked Joan what she saw. She replied that she could see Ted in his cricket whites playing cricket and looking very fit and happy. I remarked that he seemed to be enjoying a game of celestial cricket. Joan's smile widened and she added that cricket had been Ted's great passion. Then a look of deep sadness passed across her face. I asked whether she would like to speak with Ted and she nodded. So I suggested she walk up to him and see what might happen. After a moment, Joan said that she was now standing next to him and he had put his arm around her. What was he saying? He was saying "Don't worry, everything is going to be all right." I asked Joan to look around her. Was there anyone else present? Then she could see her deceased sister and parents smiling and waving to her.

I had encouraged Joan to use her own imagination, to put it one way, or spiritual insight, if you prefer. I did not know at the outset what would happen. Instead, I silently offered a prayer and put my faith in Joan's capacity to find within herself, and bring to consciousness, what she needed for her own healing.

For Joan, the healing process began readily enough. It is not always the case. Christine came to see me with a history of chronic depression that had not responded to antidepressants. Going through her life story with her, it was easy to see why she was so vulnerable. She had suffered at the hands of an unkind and insensitive mother throughout childhood, never feeling valued and cherished for her own self. Academically she had succeeded, and as is often the case, this had for a time bolstered her self-esteem. Later, it all fell apart when a personal relationship failed. Since that time, her emotions had frozen over and she had lived in a state of profound withdrawal.

I put it to Christine that perhaps the time had come for her to look into the black cave, which is how she described her depression, and to see if any answers lay within. I would go with her if she felt ready to do this.

Christine's first response to going into this dark place was that it was cold and empty. After a few minutes she reported finding a pair of steel handcuffs on the stone floor. Then she found a rope and soon after, an iron

chain. It is not hard to imagine what these objects said about her bleak and lonely inner world. Christine was now getting into something of a panic. I pressed her to go on looking. Then, after what seemed an eternity, her expression changed to one of concern. I asked her what now. She had found a little puppy in a dark corner. So I suggested she pick it up and hold it to her. I watched her closely. With her eyes still closed, she cradled the puppy. What could she feel? She replied that she could feel the puppy's love for her. I urged her to let her own love flow to the puppy at the same time. She began to cry. After a pause, I asked her to find an image for the emotion that flowed within her and she chose a heart made of gold. Then I invited her to picture a sunbeam falling on this golden heart so she could see it in all its beauty.

The nature of this experience may be understood in different ways. As a psychological process, the puppy symbolizes the child Christine. She loves and nurtures this child-self, which she had thought was lost forever and in doing so discovers that she still has the capacity for love. In terms of spiritual object relations, we can see it as helping Christine retrieve her soul that had got buried in the wasteland of her childhood and to see how bright it shines in the light of the divine source.

How can we know which account to be true? I would go for "both/and." In any case, the important thing is to support a therapeusis coming from deep within, all of which lies within the compass of the human psyche, limitless like the sky above and yet so powerfully expressed through the dramas of daily life.

In my work, I see many people who are born into situations of great hardship. They are not likely to come along with knowledge of karma or to be looking for such an explanation either. Yet the burden of misfortune is lessened if only we can make sense of it and see it as having some kind of purpose. Finding such an understanding weaves a narrative from the life lived. For instance, sometimes people who have suffered dreadful neglect in childhood become devoted nursery nurses and are able to give to other children what was denied to them. In doing so, consciously or not, they are also nurturing themselves.

Ann suffers from a progressive paralysis and is wheelchair bound. The disorder began in childhood, and, worse still, her three brothers had bullied her relentlessly. As you may imagine, the home life of this whole family was wretched and later her parents also rejected her. The cry from the bottom of her heart was "Why me?"

In searching through her unhappy life, she recalled one particular place she had visited and loved, in the Lake District. By way of a leap of the imagination we went there together. Up on the top of the fell, she gazed around her, drinking in the beauty of the hills and valleys. Then it occurred to me to ask her to imagine herself to be the living spirit of the mountain. To her surprise Ann found she could do so. In that role she volunteered that she had been there for thousands of years and seen much of life, people coming and going and generations of families living close by. I enquired if the spirit of the mountain was close to God. She answered that God lived up here in this place. Could the spirit of the mountain see with the eyes of the Creator?

Indeed yes. So I asked Ann to look down from this high place and find the girl in the wheelchair.

A long way down, she could see herself once more as that child, being cruelly bullied by her brothers. Could God help Ann to answer her question "Why me?" All at once, the answer arose from deep within her. "You were sent to teach your brothers and your family how to love!"

No one could have been more surprised than Ann to hear this coming from her own lips. Was there any thing else she needed to ask? With a flash of anger, she said, "Then why didn't you stay and take care of me?" The answer came right back at her, and with great tenderness. "I never left you, not for one minute, and I am with you always."

Ann's story reminds us that the aim of working with spirit is to bring out the soul wisdom that is already there in that person. When we see that wisdom in action, resolving a problem arising from deep within the self, we find it as moving as if it were our own discovery.

This wisdom of the higher self, as it is sometimes also called, can as easily be directed to problem relationships with others, never mind if it concerns someone who has already died.

Patricia had suffered from depression for many years that went back to her mother's life-long resentment of her daughter with whom she had become pregnant at the age of 17. Pat grew up desperate for approval, but feeling she could never please. As so often in the case of anxious attachments, Pat could not leave home and start her own life. Her mother would mock and belittle her and Pat would be filled with an anger that she never dared to express. Instead, the anger was turned against herself, hence her depression.

When her mother died, Pat heaved a big sigh of relief thinking she could now get on with her own life. But she found she could not. Mother's presence was all around and she could hear her mother scolding her still, even when she took a bath! She felt possessed by her mother, as she put it, and became suicidal. I said to Pat that suicide would resolve nothing and was no way forward. Instead, we needed to find a way to help the two of them separate. Pat was willing to try, so I invited her to confront her mother in death as she had not been able to in life. We could do this by having Pat imagine her mother sitting there in an empty chair placed in front of her. Then Pat could be encouraged to express her feelings directly. Pat already felt that her mother was in the room so she went ahead. With encouragement from me, she was able to face her mother for the first time with a few home truths and told her it was time she got off her back.

To see if this was going to meet with any success, I now asked Pat to come over, sit in the empty chair and role reverse with her mother. Speaking as Mother, the answer came right back that she had no intention of stopping. Mother enjoyed hanging around and making Pat's life miserable. In any case she had nowhere else to go!

What was happening here can again be understood at two levels. As an exercise in psychodrama, the emotional relationship with mother that Pat was still carrying around inside her was being externalised. At the level of spirit the mother was truly stuck and needed help to find release.

To find out more about this, I asked the mother, through Pat, about the life she had been living on earth. I learned that her own mother had rejected her from an early age, she had resolved to escape from home, and that she took the first man she could to help her get away. But she had become pregnant with Pat, which ended her hopes of a career and tied her to a man she did not love. Her resentment and frustration was heaped on her daughter. Why had she never left this unhappy marriage? It was most probably a sign of her own deep insecurity, dating back to her own early years. Nor could she now let go of the daughter she loved to hate.

Evidently mother was not going to be able to move on unless she could feel safe and secure, so I asked her to look around to see if there were any friends or relatives in this place she was stuck in who could accompany her on her way. There was nobody to be seen. I urged her to look for just one person in her whole life that had shown her kindness. After a long pause, she said "Mrs. Cox," It turned out that Mrs. Cox had been a nurse who had stayed with them for a time and made a real fuss over the little girl. As Mother recalled her, her face softened and I asked her to try to find her. Then she smiled and said she could see her, looking just the way she did all those years ago. I asked her to take her hand and turn with her and walk towards the light. There was now no protest and she left with her friend. When this was over, Pat looked emotionally drained but at peace. She went back to her own chair and said, "It feels that she has really gone, for the first time."

This example illustrates how therapeutic work with the psychological and spiritual can combine. When they do, they flow together seamlessly. Perhaps it is only our limited intellect that divides up consciousness and puts it in boxes with different labels.

My last example describes a wider horizon still. Helen, a woman in her 40s and engaged in spiritual practice for sometime, became suddenly aware of feeling deeply emotionally burdened. Her life was otherwise well balanced and there was nothing she could identify to account for this experience. It seemed to her that she was carrying within her the presence of a troubled soul, definitely not herself. All Helen could say was that she sensed a woman calling out to her in distress.

Helen felt it was important to try to understand more about this voice speaking to her from within and she asked me for my help. By means of light hypnotic induction, I was able to make direct contact with the woman, Marianne, as she called herself and this is the story she told me.

Marianne had lived several centuries ago. Her mother had died in childbirth and she had been brought up by her father who was an impoverished crofter. As a small child she fell ill, and father, at his wit's end, left her close to death on the doorstep of a convent. The mother superior found the child lying there and took her in. Marianne was nursed back to health, and although deeply affected by the loss of her father, she grew to love the mother superior, who showed her great kindness and the convent became her home.

When she was still little more than a child, there was a civil uprising and a band of drunken soldiers broke into the convent. Mother Superior insisted that Marianne hide herself and then went out with the other nuns to

face these soldiers. The nuns were all raped and killed. Marianne could hear what was happening and was terrified. Later, she crept out to find bodies everywhere. Weeping, she fled the convent and ran into the nearby woods. There, overwhelmed with guilt at having been able to do nothing to save her beloved mother superior, she hung herself. Immediately she found herself in spirit back at the convent, unable to leave the scene of the massacre. From that time on, she wandered alone in a state of shock at her abandonment and deeply burdened by guilt, until she found herself attracted to Helen and made herself known.

The therapeutic task was to take this traumatized young woman back to her suicide and help her go through the death, much as a midwife takes a baby through birth, so that she could complete her spiritual journey. As soon as she crossed over, the first person to greet her was the mother superior. Marianne wept and asked for forgiveness. Mother Superior embraced her. "You have nothing to blame yourself for." Marianne answered, "But how can I repay you for all you did for me?" Mother Superior replied, "I have waited a long time for you to come and you are repaying me now by enabling me to be the first person to greet you."

Then Marianne looked round and saw her father. He asked her to forgive him. Not for a day had he forgotten her. He had died a few years after leaving his child at the door of the convent, still in anguish about whether he had done the right thing. Finally, Marianne's mother appeared, lovingly greeting her for the very first time and this family was complete and reunited.

This is where my patient Helen and I left Marianne, who never troubled Helen again. The impact on Helen was profound, for it addressed what had been a lifelong concern of her own, the feeling that it was dangerous to love without reservation, for fear of abandonment.

In a letter from Helen some months later, she explained how she and Marianne had both been released from what she called "the trap of abandonment." Through taking part in Marianne's reunion, Helen could see that the actions of Marianne's parents and mother superior had not been intended to cause hurt and rejection. On the contrary, their love for Marianne was as great as hers for them. In the light of this experience, Helen could now look at her herself and her own family in a new way.

Was Marianne an alter-ego, as some psychiatrists would say, that represented a split-off aspect of Helen's personality and expressed a core emotional problem Helen still needed to resolve? Do we sometimes attract souls who are traumatized because we have been wounded in the same place ourselves? Or could it be that we cannot always let go of the life we lived before, a kind of spiritual post-traumatic stress disorder?

Each of us has to make up our own mind. In any case, there can be no intellectual certainty. But as practitioners in the field of mental health, I am in no doubt that working with spirit brings another dimension to what we can offer. From the personal viewpoint, the approach feels right for me and I am deeply grateful to be able to bring together in my work my knowledge of science and psychology on the one hand, and my awareness of spirit on the other.

Lastly, I hope it has come across from my examples that working with spirit means to be replenished continually from one's own spiritual source. The

therapist does not have to set himself up as God. He does not have to know all the answers. His task is to point the way and in doing so, he takes part in a process of sharing that began when he himself was helped by others to find his own spiritual direction. There is no place for self-importance in this. Earth is our spiritual kindergarten and we are all here to learn the same lesson.

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