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Bustos, Nick

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Psychotherapy in the Dream: A Phenomenological Exploration

By Nick Bustos, PhD, LMFT

Abstract: Post-materialist ontologies offer a transformed worldview whose implications point toward the illusory nature of the separate self, or ego. Aligned with the literature of mysticism and perennialist spiritual models, this portends a significantly altered backdrop for the practice and discipline of psychotherapy, the underlying premises of which assume a strict existential dichotomy between patient and therapist. Kenneth Wapnick, preeminent scholar of the twentieth-century spiritual document of *A Course in Miracles*, provides a relevant model toward integrating spiritually-based, ego-negative states within psychotherapy practice. The author studied the lived experiences of eight psychotherapists, both practicing and retired, who practice according to this method. Participants revealed that removing identification with the ego and joining spiritually with clients was the task of primary importance in the psychotherapeutic interaction. This included developing a relationship with the 'Self' beyond ego, symbolized as living, inner presence of transcendental love which animated the treatment process and significantly altered therapists' view of clients, themselves and the ultimate purpose of psychotherapy. These findings potentiate the inclusion of a broadened, spiritually-integrated framework within the therapist-client interaction, in congruence with post-materialist ontologies.

Keywords: *Psychotherapy, post-materialist philosophy, mysticism, nonduality, consciousness studies, therapist development, healing*

Introduction: Radical Ontologies, Practical Implications

Post-materialist ontologies, many having been advanced on the heels of findings in quantum mechanics and related fields, are asserting a radically altered picture of the universe, one that defies the physicalist, rationalist, and positivist premises of the 20th century scientific paradigm. A principal example is illustrated through the idea of the irreducible nature of mind, (Kelly, Kelly, Crabtree, Gauld & Grosso, 2007) with proponents offering evidential clues suggesting that human consciousness may be nested and enfolded within a ‘universal consciousness’ or ‘unified field’ (Kastrup, 2019; Laszlo, 2014). Implicit to this view is that the individual experience of separateness, that is, of existing as a discrete individual apart and separate from other discrete persons and objects, is an illusory construct, the appearance of which belies a more fundamental, unitive reality. On this, scientist and contemporary idealist philosopher Bernardo Kastrup summarily states: “There is only cosmic consciousness. We, as well as all other living organisms, are but dissociated alters of cosmic consciousness, surrounded by its thoughts...” (2017, p. 153). Kastrup and others¹ can be credited in forwarding related concepts which variously suggest:

- Consciousness or *mind* – not matter – is the ‘ontological prime’ comprising reality;
- The physical universe/material reality does not exist independently *apart from our experience of it*;
- Space and time as we believe them to be are not objective-independent features of a world ‘out there’ but observer-dependent features of *mind*;
- The brain and body are in the mind, not the other way around;
- The universe is in the mind, not the other way around;
- The universe is an elaborate, entangled matrix held together within a unified field, or *universal mind*.

A serious reading of these ideas necessarily upends the Newtonian-Cartesian worldview which includes the materialist-physicalist premises upon which modern science – including the academic discipline of psychology and psychotherapy – is built. Likewise, this poses significant challenges to the commonsense experience of life and the multitudinous affectations that populate the life of the individual. Indeed, the foundational, animating supposition of the separate self can be summed up as follows: *I am a personal self, and I exist separate and apart from others and the world.*

However, as extensively reported within the literature of mysticism and the perennial philosophy (Huxley, 1945/2009; Underhill, 1930/2005), there are domains of life experience wherein individuals declare, often in compelling terms, that the world is akin to a dream and that the experience of the separate self, or ego, is an illusion². Take for instance the experience of Bill Barnard, professor at Southern Methodist University, who reports the effects resulting from an enduringly transformative spiritual awakening:

I remember laughing, realizing on some level of my being that my previous identification with my body was a joke, knowing that I was never just an ego and I never would be just

¹ For further reading see Bohm, 1990; Dossey, 2013; Lanza, 2016; Laszlo, 2004, 2014; Radin, 1997, 2006; Talbot, 1991; Theise & Kafatos, 2016.

² This is in contrast to pathological states observed in psychotic or dissociative mental disorders.

an ego, recognizing in the core of my being that, contrary to what I'd always believed, I never had suffered and I never would. (in Kripal, 2017, p. 80)

This experience and others like them (James, 1902/1997; Marshall, 2015) offer phenomenological evidence in alignment with ontologies purporting a more fundamental unity at the heart of existence, and as such, implies for individuals a vastly different way of being, perhaps more appropriately situated within the literature of non-dualistic spirituality and related transpersonal models (Prendergrast, Fenner & Krystal, 2003; Walsh & Vaughn, 1993). And so, a natural question begins to emerge, which is: if consciousness is primary and the ego is an illusion, then how does that come to impact one's experience as an 'I', seemingly separate from others, the world and everything in it?

This question has specific relevance within the arena of psychotherapy, whose underlying practice-logic assumes and reifies a strict dichotomy between patient and client. Psychotherapy as a helping profession exists *precisely* because of the dualistic assumptions appearing to separate the therapist (self) from the patient (other); to be a psychotherapist is to take for granted that there are people seemingly 'out there' who require help and intervention and who are, by definition, separate. Yet if advances in contemporary consciousness studies research alongside their startling implications are to be taken seriously, then there must be some correlative impact within the arena of psychotherapeutic practice. The present study is an attempt to examine such experiences and their implications within the context of clinical work.

Getting out of the way: Ego-Negation in the Psychotherapy Encounter

'Getting out of the way', alternatively termed by this author as *ego-negation* (EN) is an experience which some psychotherapists report as essential to clinical practice. This is a broadly defined term that describes the therapist's ability to dis-identify with the ego³ and thus offer therapeutic interventions from beyond the limitations of the individual self-structure. Often this is underscored by a sense of deep, empathic joining with the client⁴ and further highlighted by numinous or spiritually-laden qualia such as peace, timelessness or a pervasive feeling of ineffability (Geller & Greenberg, 2012). Additionally, and perhaps most interestingly, the suspension of the individual self-sense, or ego, may result in therapeutic interventions administered from an intuitive grasp of the workings of the client, rather than resulting from rational-intellectual assessment (Marks-Tarlow, 2012; Reik, 1942; Rogers, 1980; Wapnick, 1980). Consequently, the outcome for the therapist is a feeling of unitive joining⁵ with the client, thus expanding therapy's purpose to include the realization of trans-egoic states of

³ 'Ego' is here utilized in rough equivalence with its use within Eastern spiritual traditions, encompassing the entire psychic structure which includes the fundamental self-sense or self-identity. Defining the ego, Wapnick writes, "[it is] the belief in the reality of the separated or false self... roughly equated with the entire psyche" (1993, p. 63).

⁴ The terms 'patient' and 'client' will be used interchangeably in this study.

⁵ These experiences thus contain elements in alignment with nondual mysticism and spiritual development, the essential feature of which is a felt-experience of *unity*, necessarily encompassing one's perception of the world, self and others. As Underhill (1930/2005) writes: "... this implies the abolition of the individuality.... It is essentially a movement of the heart, seeking to transcend the limitations of the individual standpoint and to surrender itself to ultimate Reality; for no personal gain, to satisfy no transcendental curiosity, to obtain no other-worldly joys, but purely from an instinct of love." (p. 53)

awareness, though integrated within the context normalized treatment provision (Rogers, 1980; Siegel, 2010; Wapnick, 1980, 1994; Wegela, 1994; Wittine, 1989).

The question of how these transcendent experiences impact the therapy process loom large, as they call into question some of the formative assumptions upon which the client-therapist relationship is built, namely: if the therapist moves beyond identification with the personal self toward a more unitive awareness, how does that come to define the relationship with the client, the *ostensible other*? Moreover, how is this experience appropriately situated within the process-oriented aspects of therapy? Finally, is there a way for psychotherapy to be effectively framed within a phenomenological model that suggests the illusory nature of the dualistic ego-state and its attending cognitive-perceptual contents?

Psychotherapy according to 'A Course in Miracles' and Kenneth Wapnick

A relevant though largely unacknowledged figure within the field is Kenneth Wapnick, clinical psychologist and preeminent scholar of the psychodynamically-informed spiritual path of *A Course in Miracles* (1992)⁶. For Wapnick, the process of psychotherapy comprises a functional analogue to the spiritual journey, offering the therapist an opportunity to recognize his spiritual unity with the patient by removing the blocks – judgments, intellectual preoccupations, projections and countertransference reactions – which uphold a perceived disunity, or separation, between himself and the clinical subject. Wapnick therefore sees psychotherapy as an apophatic process, that is, requiring only the therapist's relinquishment of the ego in order to potentiate healing. These insights are based upon the foundational non-dualistic premises of *ACIM* which state:

- The world is a projection of the transpersonal 'mind'
- The ego is the thought of separation within the mind which gives rise to the *experience* of the world
- Healing is thus equated with healing the thought of separation

The experience of the world, according to this teaching, is akin to a dream, whose origin, as such, is never separate from the mind of the dreamer. To heal the erroneous belief in separation is thus to awaken from the dream, leading to a transformed, unitive experience of the world and oneself in relation to it⁷.

A unique aspect of the psychotherapy process described by Wapnick is the inclusion of a source beyond the ego – symbolized by 'Jesus' or the 'Holy Spirit'⁸ – whose presence is synonymous with advancing a healed, holistic outlook between therapist and patient. Providing

⁶ The author was a student and mentee of Kenneth Wapnick, from 2008 until his death in 2013.

⁷ While the philosophical underpinnings of *ACIM* shares in some of the features found in Eastern non-dualistic spiritual traditions, it is also firmly grounded within a Platonic, Neo-Platonic and Gnostic metaphysical framework. For a complete analysis see Wapnick's *Love Does Not Condemn: The World, the Flesh, and the Devil According to Platonism, Christianity, Gnosticism, and A Course in Miracles* (1989).

⁸ it is important to note that name 'Jesus' or 'Holy Spirit' as referenced in *A Course in Miracles* is not contextualized within a traditional Christian framework. In other words, this is not the *Christian* Jesus. Rather, the name refers to a symbolic inward presence, pointing to the experientially real non-ego 'Self' beyond the boundaries of the individual self. For further reading see Wapnick's *A Course in Miracles and Christianity: A Dialogue* (2013).

a case study, Wapnick (1980) discusses an experience he had while in a difficult therapeutic situation in which the patient, described as teetering on the verge of a detrimental and irrevocable life decision, appears to be at the point of no return. Halfway through the session and with a feeling of despair filling the room, Wapnick writes:

...my desperation led me finally to remember that I was not the Therapist... Even as I was talking and listening to her, in another part of my mind I began to pray for help, asking my Lord to provide the words that would heal her anger and fear, and restore to her awareness the love that was her true identity. The response was immediate and I suddenly became available to the help that was there – for me. A warm surge of energy rose up from my chest, through my lungs, nose and throat... At the same time I began to speak. I don't recall what I had said previously. *Only now I was different*. I no longer saw Annette as separate from me, a patient in trouble whom I, as therapist, had to help. She was now my sister, and by joining with her I was joining with Jesus. I had become the patient as well, and together we received healing from the forgiving love of God. By the end of the session her softened face reflected the shift from anger and fear to forgiveness and love, as my well-being reflected the same shift in myself. I had learned my lesson that day, to be relearned many times thereafter. (emphasis added, p. 50)

Though couched in terminology reflective of the spiritual path of *A Course in Miracles*, the meaning of this experience exemplifies the EN phenomenon. Of interest is Wapnick's assertion that in asking for help for his patient he experienced himself as joint recipient to the help which the patient received. Relinquishing the ego, which included withdrawing from the desperate need to heal Annette, paradoxically resulted in healing for both individuals.

The implications of this experience are far-reaching, suggesting that the therapist's own healing within the treatment encounter, symbolized in this case by "joining with her... [and] Jesus" (p. 50) bears greatly on the therapeutic process. Wapnick consequently provides an alternative view of psychotherapy as an endeavor "where two persons come together to worship at the altar of forgiveness. In that joining are all dreams of separation and inequality dispelled... and God [is] invited back into our united hearts" (1980. p. 50).

Given the dearth of research focusing on the application of the non-dualistic spiritual principles of *A Course in Miracles* and Kenneth Wapnick upon the practice of psychotherapy, an investigation into the phenomenological components of this experience was warranted, covering those aspects that make for a potentially unique contribution to psychotherapeutic practice, and furthermore, to shed additional light on experientially-based corollaries related to post-materialist ontologies.

Research Justification

Limited empirical studies have been conducted whose primary aim is to examine features of ego-negation within the psychotherapy encounter as presently defined; those that do correspond with the present inquiry fall short of explicitly describing ego-negative states within the larger ontological schematic discussed here. In general, most studies focus on experiential components of 'therapeutic presence' (Geller & Greenberg, 2002, 2012), or on the related subject of 'relational depth' (Cooper, 2005; Cooper, O'hara, Schmid & Bohard, 2013;

Geller, 2013; Wiggins, Elliot, Cooper, 2012). An additional related category of empirical research examines the effects of mindfulness-based principles upon the therapeutic interaction, specifically investigating its impact upon the attitude and well-being of the therapist and its effect upon the experience of therapy (Campbell & Christopher 2012; Davis & Hayes, 2011; Fulton, 2016; Ryan, Safran, Doran & Muran, 2012).

However, the question at the heart of the present inquiry focuses on the inclusion of a broadened, non-dualistic framework – namely that of *A Course in Miracles* as expounded by Kenneth Wapnick – upon the practice of psychotherapy. This study, therefore, seeks to examine: how is the clinical encounter experienced by those who practice in accordance with the non-dualistic worldview of *ACIM*? Additionally, how does this impact the meaning or *purpose* that therapists ascribe to the provision of treatment and as a consequence, their view of the practice of psychotherapy itself?

Method

This study examined the lived experience of therapists who practice psychotherapy within the EN framework articulated by Kenneth Wapnick and *A Course in Miracles*, employing a qualitative analysis of therapist's accounts of their experiences. Below is a summary of the research.

Participants

Eight therapists with significant background, training and clinical experience in utilizing the conceptual schema set forth by Wapnick/*ACIM* in psychotherapy practice were interviewed. Inclusion criteria was as follows: (a) licensed psychotherapists (PhD, LMFT, LCSW), practicing or retired; (b) practitioners of the spiritual path of *A Course in Miracles* (*ACIM*) informed by the work of Kenneth Wapnick; (c) experience with EN as described in this study; (d) able to articulate their thoughts about the experience. Of the eight, five were retired and three were in active practice; all participants were trained and mentored by Kenneth Wapnick.

Procedure

Participants were provided an information guide prior to the interview detailing the purpose of the study, which offered a definition of EN in alignment with the present discussion. The guide prompted participants to begin recalling moments when they felt their ego was 'out of the way' in therapy and to bring to mind lived features of the experience, including its impact upon their worldview and their view of the patient-therapist relationship. Approximately one week after the initial prompt was sent participants were interviewed and audio-recorded via digital format. Interviews followed a semi-structured format (Creswell, 2007; Moustakas, 1994) utilizing specific questions and order of questioning while making allowances during the interview for a naturalistic unfolding of relevant meanings and themes. Interviews spanned approximately 45 minutes to one and a half hours.

Analysis

Transcriptions of interviews were organized, coded and analyzed according to phenomenological analytical methodology (Creswell, 2007; Hycner, 1985; Moerer- Urdahl & Creswell, 2004; Moustakas, 1994). Coding and subsequent thematic analysis was assisted using the NVivo for Mac software program. Transcription analysis sought to extract key features of

the experience, refining and compressing component elements so as to develop meaningful units of information that were then clustered into major thematic categories. This involved a six-step process, following the modified Stevick-Colaizzi-Keen method as outlined in Creswell (2007).

Once overarching themes were filtered and structured meaningfully, participants were sent a copies of interview transcriptions as well as a list of the gathered 'significant statements' of their experiences. Participants were asked to read through and examine the transcriptions and statement listings to verify whether their experiences were represented faithfully or conversely, required changes or modifications. Seven of the eight participants agreed that their experiences were represented truthfully; one participant asked that additional, clarifying content be added to her discussion on a specific aspect of the interview.

Findings

Four core themes emerged from the findings, congruent with the intent of the study. Core themes suggested that EN within the psychotherapy encounter comprised a general outline, including descriptions of the process and ultimate purpose of psychotherapy. These included: (a) perception of the ego's negative influence in psychotherapy, (b) the conscious intent to 'ask for help' to let it go, (c) which then culminated in its release and the acquisition of spiritual or numinous states of awareness significantly impacting the therapy encounter, (d) subsequently transforming participants' overall view of the therapeutic process. The results suggest that EN is not an isolated moment in time but a fluid, dynamic movement, with each component or constituent linked to its sequential counterpart, the effects of which significantly altered one's view of self and the overarching purpose of psychotherapy. The following is an overview highlighting participant responses situated within the thematic structure defined above.

Theme 1: The negative influence of the ego, being 'in the way'. Participants articulated the separative ego-state as antithetical toward establishing a fluid, selfless psychotherapeutic encounter. This was universally experienced as unpleasant, uncomfortable or counter-therapeutic. Participants described the experience of ego using phrases such as, "a red flag" and "block", and further illustrated its phenomenality in terms related to "my needs", "anxiety", "judgment," and "lack of certainty". One participant remarked:

... [If] I'm feeling anything that's not this open, expansive, caring for someone, then it's a red flag... And if I'm feeling irritated or if I'm feeling worried, or if I'm feeling self-conscious or guilty or impatient... all those are red flags to me – if I'm getting pissed off at somebody, if I'm feeling judgmental or if I'm feeling parental. These are all kinds of red flags to me...

Another participant described the ego-state as demonstrative of the need to co-opt the therapy encounter, to "be the authority... and be the one who helps my client get well". The experience of boredom, fear or judging whether one liked or disliked a client was discussed in similar terms, with one participant reporting, "it's all largely related to my needs..."

Relatedly, therapists also revealed ego-state interactions as inherently selfish, serving to allay or reinforce existing internalized beliefs, both positive and negative. A participant stated:

If you the client get well, then I'm not guilty. If you relapse and you're not getting well – we've had a few sessions and you're still not improving, seeing improvement, then that means I am a failure as a therapist, it means it's a reflection of me.

One participant described the ego-state as “sensing my own presence,” which precluded the ability to “feel present to the client.” Another individual reports it as “my own stuff” which gets in the way of effective healing. In the same vein related to the self-centeredness intrinsic to the ego-state, a participant reported, “When I'm identified with my ego, then for me, it's all about me.”

Theme 2: Turning within to ask for help to let go of the ego. Participants universally reported process events in moving beyond the ego in therapy. This required conscious intent, generally the result of becoming aware of the acute discomfort intrinsic to the ego-state. This was followed by what participants described as ‘asking for help’, defined as a turning inward toward a symbolic, trans-egoic psychological presence. The presence was generally referenced by the name ‘Holy Spirit’ or ‘Jesus’, though some participants used varied terms such as ‘True Self’, ‘Higher Self’ or ‘Love’. Asking for help within this context reflected the intent to withdraw from identification with the ego and its attending cognitive-perceptual constituents. One participant illustrates his experience:

When I was with a client and I was present for what the client was sharing – sharing their pain, or sharing their blaming or whatever they were sharing, I was looking at whether or not I was judging. And if I felt a twinge of judgment I would step back and ask the Holy Spirit, that I could choose to see this another way, and I was very present to that. I knew that if I was in any kind of pain that I wasn't in the right place.

Another individual discussed building a refined awareness to the negative experience of the ego in session, which, “became intolerable to me.” The feeling of being “fed up” was described by another participant, where, “I truly feel... the negative effects and the cost that it has to be listening to the ego.” The participant continues: “I know it doesn't sit well with me to rely on the ego and it's in those moments where I know that to take away that fear that I'm feeling, I need to let it go and reach for Jesus' help... in that moment I'm the one that needs to ask for help...”. Another participant offers her experience in similar terms, stating:

So... if I'm catching myself in the act of thinking I'm right... or notice that I'm judging... then bringing it to my teacher... [and] asking for help.... I'm bringing it to the part of my mind – the mind – where the shift happens.... You know, just opening, sort of recognizing when I'm off and then opening to, "okay, help me", just asking for help...

Theme 3: Spiritual, ego-negative experiences significantly impacting client interactions. Following the experience of asking for help participants universally reported the emergence of and immersion into the ego-negative state. This yielded experiences appropriately labeled ‘spiritual’, ‘transcendent’ or ‘non-ordinary’ whose effects were

interpreted as beneficial and healing for the client and themselves, and which positively impacted the therapeutic process. Experiences ranged from feelings of peace and clarity to numinous or explicit spiritually-laden phenomena wherein normal conscious functioning was subsumed by the emergence of the ostensible Higher Self.

Discussing the source beyond ego, one participant states, “the source, as I understand it, is my Higher Self, my True Self, having nothing to do with my ego, and having nothing to do with me, the therapist.” Therapy itself was viewed as more resonant with patients and more effective overall from this state, with therapists stating that communication was clearer, more direct and more impactful overall. As one therapist states:

... it seems that the message I am sharing at the moment cuts through a lot more effectively. It seems like it becomes more integrated in them rather than [it being] just words...

Participants also universally reported inspired, spontaneous and effective interventions administered from the ego-negative state. One therapist said, “I knew it wasn't coming from me... but coming from a higher [me].” Citing the novelty of interventions and the associated peacefulness that resulted from such states, a therapist reports: “I never knew what would come through when I allowed this process to overtake me, but there was a sense of peacefulness, there was a sense of certainty.”

Additionally, participants highlighted the ineffability, yet profundity, of relating to others from the beyond the personal sense of self. As one participant said, “... when I was out of the way... [I] was really gone. It was a form of therapy that certainly you didn't learn about when you were studying for your master's.”

Physical, non-ordinary experiences also accompanied the ego-negative state. Emphasizing the ineffability of the experiences, a participant reported:

I feel expansive and kinda glowy [sic], and I feel like there's love coming out my eyes, and connected to whoever's there with me. So I guess it's... a visceral kind of thing. Head and heart oriented I guess, but an open, expansive, connected feeling. It doesn't really have words.

Another participant describes a profound, if rare, experience of “pure beauty”:

It doesn't happen that often, but there are times when something happens in the therapy where you and the patient have this feeling of total joining and the patient knows it and you know, and there's just a moment of pure beauty in the therapy and that's where the healing occurs...

Participants emphasized the stark contrast between therapy offered from the standpoint of the ego as opposed to therapy while in an ego-negative state. One participant says, “...there was just a sense of – I hate incorporating the word love because I'm not sure that sounds sincere, but yet, I think in that state there was that sense of being surrounded and enveloped by something that the ego world doesn't offer.” Another therapist summarizes the

contrast, stating, “I think the biggest difference would be, in the ego it's as if you are this individual making decisions about what to say, what to do, how to react and it's as if you're choosing what to do with the client. And getting out of the way, it's just happening.”

Theme 4: Seeing psychotherapy as an inherently spiritual, shared healing experience.

Participants universally sought to contextualize their experiences of letting go of the ego in psychotherapy practice within the broader outline of their spiritual path, thus establishing a functional confluence between spiritual and professional life. This included experiencing a fundamental shift in how they viewed the purpose of the patient-therapist relationship, as well as expanding the definition of healing and the ultimate goal of psychotherapy.

One participant articulates this in terms of viewing the therapy process as a shared healing journey undertaken with the client, stating:

I think that what I call ‘real healing’ anyhow, is the fact that we're both... on our journey of healing, and to see that even though I'm sitting in the therapist's chair that I'm in a process of healing as well.

Therapists additionally emphasized experiencing reciprocal healing benefit in working with clients. As one participant states, “I feel like I'm healing through my connection [with clients]... And I learn tremendous amounts from the people that I'm with.” To that point, another participant states, “I don't think the client ever realized that he was serving me as much as I was serving him.”

Therapists thus sought to expand psychotherapy’s purpose beyond traditional norms. As one participant states:

I see psychotherapy in its purest form, as the experience of two people coming together, joining, without a sense of difference.

Participants agreed that psychotherapy practice served as an ideal setting where lessons from their spiritual life could be practically applied, leading to a unified perception of the process and purpose of psychotherapy. While therapists universally described their adherence to the norms and standards of ‘normal’ psychotherapy practice, they nevertheless felt as though their experiences with clients entailed a broader, unitive purpose. As one participant summarily states:

Anybody who walked through that door was an opportunity. And I know that now in every instance of everything I do, whether I get a flat tire and the guy from Triple A comes and helps me. It doesn't matter... I can join with them. There's nothing else. [I] either want to be separate and unique, or I join. It's hard work.

Discussion

For participants in this study the EN experience was a very real phenomenon, encompassing the whole of the psychological identity, profoundly impacting perceptions, cognitions and felt-sense experiences, resulting in an expanded worldview aligned with non-

dualistic spiritual principles. Findings further suggested a significant alteration to participants' view of themselves as therapists. Whereas traditional norms in psychotherapy assert that the therapist is charged with and responsible for treatment, participants reported that another presence within, originating from beyond the ego-self, was instead 'doing the healing'. The primary task for participants, therefore, was to 'get out of the way' and allow this presence to emerge. This led to a feeling of *participating in*, rather than *unilaterally creating*, a shared healing experience, underscoring the notion of the encounter containing a meaning and significance beyond what is understood in traditional practice models.

Previous Research, Contrasting Elements

Previous research supports the findings. For example, Geller and Greenberg's (2002) study on 'therapeutic presence' showed that the experience of 'presence' shared in some of the lived features as reported by individuals in this study, including: a sense of total immersion in the moment; enhanced awareness; feelings of increased spontaneity and creativity; the ability for intuitive, highly empathic resonance with clients; a sense of trust and ease for the process; as well as increased feelings of love and compassion for clients. Similarly, Cooper's (2005) study on 'relational depth' bears similar results as well, with participant reports on relationally-deep encounters with clients containing qualities of profound empathic attunement, high levels of congruence, perceptual clarity, and positive emotive responses toward clients such as love, openness and deep acceptance (p. 11).

It is important, however, as a point of contrast, to highlight the particular spiritual context in which this study's results were framed. This holds the salient meaning of the present findings and as such, offers a significant point of departure from previous research. Implied throughout is the recognition of an internal dichotomy between the participant's egoic identity as a therapist, and their spiritual, non-egoic identity, identified by some as 'Love', 'Higher Self', 'Holy Spirit', or 'Jesus'. Through this symbolic medium, therapists sought to achieve a feeling of spiritual union with their patients, understanding that relinquishing attachment to the ego would create a healing environment conducive for maximal impact while also enriching the therapy process, adding to it an underlying experiential basis for ego-negative states of consciousness.

Participants thus viewed their EN experiences with clients in distinctly spiritual terms utilizing a process-oriented framework – being *in the ego* to then *going beyond it* – to articulate its phenomenality. The dichotomy between therapist and client was viewed as superficial, a secondary feature to the underlying oneness which they ultimately shared. The less identified therapists were with the separate, egoic self, the more joined and unified they felt with their clients, a unification which transcended the constraints of the body-mind matrix.

Finding an Appropriate Context

Given this, the essential nature of this experience is more appropriately contextualized within the literature of non-dualistic spirituality, spiritually-based psychotherapeutic models and spiritual healing. For example, Martin's (2015) analysis of so-called *persistent non-symbolic experiences* (PNSE), a term which references experiences alternatively known as *nondual awareness*, *enlightenment*, *mystical experience*, and so on, provides a helpful phenomenological corollary for the experiences shared by this study's participants. For Martin, a significant element of PSNE is the reported decrease in *agency* of individuals who inhabit

persistent nonsymbolic states, that is, the experience that one is being carried or moved by a power or force beyond the conditioned egoic will.

Additionally, the philosophy of Eastern non-dualistic spiritual traditions, particularly that of Hindu Advaita Vedanta, provides an additional theoretical backdrop upon which to ground the findings. As Deutsch (1969) writes, Advaita Vedanta, “is concerned to show the ultimate non-reality of all distinctions”, whereby the individual recognizes his or her true identity beyond the separate self, undifferentiated from that of *Brahman*, the spiritual substratum beneath the world’s illusory appearance. The lives and teachings of Eastern spiritual luminaries such as Ramana Maharshi, Nisargadatta Maharaj, and Ramakrishna Paramahansa, among others, offer a compelling view into the nature and experiential properties of the ‘Self’ beyond ego⁹. Catholic contemplative and mystic Bernadette Roberts (2005, 2007) similarly describes states of mind beyond ego and selfhood, remarking that the contemplative journey comprises discrete levels and stages toward the ultimate goal of union with God and beyond.¹⁰

In the psychotherapeutic context, Blackstone (2006, 2007) and Wegela (1994) offer psychotherapeutic models based upon non-dual spiritual practices. Blackstone describes ‘nondual awareness’ as an achievable relational state between therapist and patient emphasizing a state of mind free from, “conceptual representations, constrictions and fragmentations” (2006, p. 27), while Wegela articulates the concept of ‘brilliant sanity’ within a contemplative psychotherapeutic schematic, this being a non-ego condition leading to a diffusing of the barriers between therapist and client. In each model there is an emphasis in assisting therapists achieve an expanded inward state, highlighted by a lack of self-referential thinking coupled with an increase in refined perception, intuitive insight and numinous, spiritually-laden experiences.

Interestingly, in terms of the functional mindset required for healing as described by participants in this study, certain aspects of the findings contain corresponding features as those detailed by the famous twentieth-century spiritual healer Joel Goldsmith. Healing, for Goldsmith, entails a transformation of consciousness of the would-be healer, from an egoic, separative identity, to one unified with God, and thus endowed with the ability to extend healing to others. In *The Art of Spiritual Healing* (1959/1992), Goldsmith writes, “It is not in your understanding or ability that will ever help you or anyone else: It is God’s understanding and ability of which you permit yourself to be an avenue, just as a composer permits melodies to flow through him” (p. 139). Note that this sentiment is one which was commonly reported by this study’s participants.

This approach is further corroborated by Targ and Katra in their book *Miracles of Mind* (2010). Targ, a laser physicist and leading figure in the field of parapsychology and consciousness studies, cites the preponderance of data related to spiritual healing effects, suggesting that the ‘nonlocal mind’ accessed by genuine healers transcends spatial and temporal boundaries. The authors further contend that it is the healer’s ability to form a stable,

⁹ For further reading see Maharshi (1975); Nisargadatta (1973); Ramakrishna, Gupta, & Math, (1942).

¹⁰ Roberts’ work is noteworthy in her description of the ‘no-self’ state, which articulates a dimension beyond the *unitive* or ‘no-ego’ state often discussed in traditional Catholic mystical theology as the culmination of the spiritual journey.

conscious union with this trans-egoic ‘organizing and purposeful principle’ (sometimes called God) which is then shared with the healee, that potentiates healing.

The Role of Kenneth Wapnick and ACIM

Yet the work of psychologist Kenneth Wapnick, based upon the psychologically-informed spiritual teaching of *A Course in Miracles* (ACIM, 1992) naturally offers the most lucid foundation upon which to discuss the findings of the present study. Illustrating ACIM’s view of psychotherapy and its relation to healing and therapist development, Wapnick (2016) writes:

The process of healing occurs on a level totally unobservable, yet immanently experienced. It is the effect of a process of growth that involves therapists’ development of their... intuitive natures: their capacities to set aside their intellectual, rational thought, and allow another thought to take its place – one that is more real and natural, though different from our personal selves. Psychotherapy then, is in essence an undoing of the unreal, to be replaced with the love and wisdom that is always there, and which alone reflects our real selves. (p. 411)

Wapnick’s method of psychotherapy blends the insights of non-dual philosophy and mysticism with the practical needs of the treatment encounter, thus expanding psychotherapy’s purpose to include the revelation of a trans-egoic, spiritual dimension of reality experienced and conveyed within the clinical context. This of itself facilitates healing, resulting in the provision of therapeutic interventions appropriate to the patient and his or her symptoms, though generated from a non-spatial, atemporal spiritual ‘source’ originating from outside the therapist’s ego-self. Wapnick asserts that while the therapist behaves as his or her role dictates, he or she never loses sight of the underlying unitive purpose to which the encounter is aligned. Wapnick elaborates: “Our real responsibility is not to our patient... Our task is only to let the Spirit of God heal through us as we join in his name. We step back and let him lead the way” (1980, p. 52).

The insights offered by Wapnick are clearly reflected in the findings of the study. Participants repeatedly sought to contextualize their experiences within the larger framework of their spiritual paths, thus elevating psychotherapy’s meaning beyond its traditional premises. Participants were also very clear to emphasize adherence to their professional roles, working within and fully embracing the parameters and constraints of the profession. In this way, therapists regarded themselves as ‘normal’. Participants thus seemed to seamlessly inhabit a split identity: both as spiritual practitioners hoping to advance their progress in what they believed to be the ultimate healing – unity with God – while sharing this loving, transcendental attitude with patients within the demarcated parameters of clinical practice.

Implications – Psychotherapy and Beyond

That the experiences reported by this study’s participants offer a meaningful phenomenological analogue to the insights of non-dual spirituality and mysticism as well as progressive findings from modern consciousness studies suggest important implications for the field of psychotherapy.

A broadened context for psychotherapy. A primary implication based on this study's findings suggests a broadened context for the psychotherapy encounter to include a shared, spiritually-informed healing experience for both therapist and patient. This is a logical extension of the ontological framework from which participants described their experiences, based on the non-dualistic principle that ultimately, therapist and patient *are already joined* – the correction lay in undoing the egoic interpretation which heretofore framed the encounter. Thus, therapy's focus is not on the amelioration of the client's symptoms as such, but rather, an opportunity for the therapist to *heal himself* – vis à vis undoing the ego – and consequently infusing therapy with a unitive healing attitude from which interventions would naturally emanate.

Therapists must appreciate, however, the process-oriented aspects involved in divesting themselves of the ego, as they are ultimately compelled to recontextualize their own roles and the basic nature of the therapeutic self-concept. This involves becoming acutely aware of one's own needs, agendas, and clinical rigidity – those oft-unconscious aspects of the clinical ego whose core is founded upon the belief that *I, the therapist, am the healer* – and undoing their effects through a symbolic, inward act of *turning away* from the ego and *toward* with the non-ego presence of love in the mind. To accomplish this further requires the ongoing cultivation of an attitude of clinical humility, underscored by the awareness that though healing may come *through* the therapist, it would be mistaken to believe that it originates *from* the therapist (Bustos, 2018). Following this, therapists would learn to consciously assume a dual-aspect identity: that of a professional therapist, abiding by the procedural and structural norms of the profession, while at the same time demonstrating the willingness to subsume their own agendas and operate from the non-linear, transrational logic of the 'real self' beyond the ego.

Developing a relationship with the 'Self'. Yet, as shown, the primary mechanism in accessing this state lay in submitting the egoic will to the 'Self' beyond the ego. While participants in this study utilized terms such as 'Jesus', 'Holy Spirit', 'Love' or 'Higher Self' to denote this identity, it is important to acknowledge those names as serving as a meaningful symbolic referent for an *internal presence* of love beyond the ego's narrow, exclusive parameters. In other words, to call upon the help of Jesus was not to engage in a magical incantation; rather, the intent was to shift one's mind from a state of separation and duality to one defined by wholeness, joining and love¹¹. From there, interventions carried a power and momentum primed for maximal impact, though imparted through an embodied felt-sense of wisdom and intuitive 'knowing'. Therapists would therefore significantly benefit from actively cultivating a relationship with the non-ego 'Self', whose transcendental nature reflects the unitive identity, the 'real self' (Wapnick, 2016) as depicted within various spiritual and contemplative traditions, meaningfully applied within the therapeutic context.

The potential for broad applicability in various treatment setting. Though participants in the study were all clinical psychotherapists and practitioners of the spiritual path of *A Course in Miracles*, their clinical experience, treatment style and general approach varied greatly. Yet the findings showed a qualitative similarity as it related to moving beyond the ego. The author

¹¹ Participants utilized symbolic references in concert with *A Course in Miracles*; thus, the name 'Jesus' or 'Holy Spirit' is important insofar as it meets the criteria for a personally meaningful non-egoic internal presence of love and wisdom. Any name, be it 'Krishna', 'Buddha', or simply the perception of an abstract 'healing energy force' would suffice.

thus poses the question: What are the implications of a general phenomenological uniformity in the experience of EN within an outwardly diverse group of individuals?

The answer rests in the potential broad applicability in utilizing EN as a foundational reference frame for therapy practice. Given that the primacy of EN lies in the inner life of the therapist – the activity of his or her mind – the style of therapy one espouses is irrelevant toward the goal of getting out of the way. Thus, EN may be employed whether the therapist is practicing strict behavior modification interventions with children or conversely, while exploring the depths of the unconscious in a Jungian analytical process. Letting go of the ego and allowing the presence of the higher self to emerge is not determined by external factors and therefore may be meaningfully accomplished in a wide range of clinical settings¹².

The role of professional competence. Employing EN in therapy practice implies that therapists already have some level of clinical training and expertise and are comfortable within the professional norms as established. This is a vital point, as the reader might be tempted to believe that the spontaneous, inspired and seemingly unplanned interventions which at times characterizes EN in therapy somehow negates the need for normalized treatment provision. This is not the case. Recall that participants were careful to denote that the inspiration they received, or the spontaneous interactions which they offered, however novel, were provided within the context of their role as therapists.

Therefore, it is necessary to encourage therapists to maintain adherence to whatever form of psychotherapy they are most comfortable with and seek to establish a relative level of mastery within its guidelines. As the concert pianist must first understand the fundamentals of musical theory, performance and composition before the inspiration of the music can be shared, so should the therapist employ whatever methods he or she can best utilize according to his or her natural tendencies. With a firm external basis for the application of therapeutic technique, as well as grounding in the ethical and professional norms required of the psychotherapy profession, therapists would stand prepared to integrate EN meaningfully within practice. Yet the external forms of the practice remain secondary – as Wapnick (2006) writes, “Our personal and professional belief systems are ultimately irrelevant to this new vision, for they are but the vehicles we use to convey the underlying response of love” (p. 418).

Including a broadened worldview within the academic discipline of psychotherapy. There is currently broad academic basis to support the phenomenology of ego-negative states of consciousness, which as discussed, has conceptual correlates in progressive physics models, integral philosophy, and of course, in the literature of the perennial philosophy. Yet in general, the profession and academic discipline of psychotherapy remains entrenched within a strict dualistic worldview, necessarily reflecting the rational, positivist, and materialist philosophical basis from which it emerged. Though there is currently no consensus related to the concepts put forth by progressive ontologies regarding the irreducibility of consciousness, or similarly for the notion of a type of ‘universal consciousness’ enfolded throughout existence (Cochran & Klein, 2017; Rosenblum & Kuttner, 2011), the evidence nevertheless is substantial and

¹² This may have particular utility with difficult-to-treat populations or within the constraints of community-based agency settings, where the risk for therapist burnout runs high. Relatedly, this author currently devotes a large portion of his psychotherapy practice to a school-district special education setting, employing this approach within the obvious constraints of school-based psychotherapy.

compelling (Bohm, 1980, 1990; Duquette, 2011; Henry, 2005; Kastrup, 2019, 2017; Laszlo, 2004, 2014; Radin, 1997, 2004; Schrodinger, 1967).

The author, therefore, poses the questions: What if the psychological sciences began to more assertively detach from the physicalist-materialist overlays guiding its assumptive premises? Additionally, what if the ideas of nonlocality, complementarity and the consciousness-modulated basis of physical reality finally touched down through academia, eventually landing in the soft sciences, shepherding the view that subject-object dualism is a mere metaphor describing phenomena that are, as Kastrup writes (2017), ripples on a pond, inseparable from the pond itself? If accepted, these insights would upend the dominant, Newtonian-classical worldview, representing a palpable sea-change in human understanding, on par with the Copernican revolution.

Laszlo (2014) argues for this very notion as a logical outcome of his A-field theory, the implications of which stand to usher in “a twenty-first century paradigm that recognizes... a deeper dimension beyond space and time and that the connection, coherence, and coevolution we observe in the manifest world are coded in the integral domain of that deeper dimension” (p. 7). These arguments and others (Beauregard, et. al, 2014; Chopra & Kafatos, 2014; Tiller, 2009) offer similar conclusions which acknowledge the need for moving beyond the rigid dualism of mind and matter toward a sincere, integrated scientific outlook, where the inherent connectivity of life, mediated by consciousness or mind-like activity, assumes a chief role.

Viewed within the context of the present exploration these insights portend a radically altered backdrop for the assumptions of clinical psychotherapy which indeed rest upon a strict existential dichotomy between therapist and patient. As such, it may be that the therapy interaction itself is an interactive play between two seemingly separate individuals, who in truth, are *one*, inseparable and part of a larger, universal, whole. Removing the illusory conceptual schemata imposed by the therapist upon the patient which includes his primary sense of self, is to therefore ‘heal’ this ‘separation’. It stands to reason, then, that these experiences and others like them offer phenomenological evidence of a more natural state, reflecting the fundamental unity at the heart of existence in which everything, including the human conscious apparatus, is included.

Conclusion

This study sought to explore the dynamic of incorporating a non-dualistic spiritual worldview within psychotherapy – namely that of *A Course in Miracles* and Kenneth Wapnick – and as such providing a phenomenological correlate to some of the more radical ideas emerging from contemporary consciousness studies as well as offering further insight on the nature of ego-negation within the therapy encounter. As observed, this bears greatly upon the experience of the therapist, and raises important questions regarding the dualistic assumptions upon which the discipline of psychotherapy is built.

In therapy, the temptation is to focus exclusively upon the client – his or her symptoms, their course, treatment methods and related objective parameters for measuring success or failure. This study was a deliberate attempt to focus on precisely the opposite – the inner life of the therapist, wherein he or she comes to view the patient not as a separate, discrete individual in need of healing, but rather, as part of *himself*. From this ontological viewpoint, the parameters of the therapeutic task take on a new, expanded course. Psychotherapy becomes

not about healing the patient, but rather, upon the therapist healing him or herself of the erroneous, yet fundamental, belief that he or she is *separate* from the patient, and from there allowing the unitive love that exists beyond the ego-self to inspire the therapist toward actions that are spontaneous, creative, and ultimately, helpful.

While this study was not focused on examining specific therapeutic outcomes, this remains an area of potential further inquiry, as relating to patients from an ego-negative state most certainly impacts the dynamics between therapist and client. In its most elementary sense, ego-negative states in therapy produce individuals who are present, attuned, patient and compassionate – all traits and qualities which in themselves are correlated to effecting positive client outcomes (Norcross & Hill, 2004; Norcross, & Wampold, 2011; Wampold, 2012)

Yet when the idea of incorporating the non-egoic source within treatment, the ‘Self’ beyond the ego, emerges, the meaning and purpose of therapy is transformed. In this vision, the therapist comes to see himself situated within a luminous, holistic dimension of timelessness, wherein all perceptions of separation are dissolved and only a living oneness is perceived. From this dimension, healing carries a new meaning, beyond that of mere symptom relief, but rather upon the realization of a love beyond form and appearances. Here the therapist is healed, and from this standpoint he or she shares this healed awareness with the client, conveyed in a form that can be heard and understood. In this, therapist and patient are *healed together*. The author concludes this exploration with an apt quote from Kenneth Wapnick:

... Therefore, my patients are my therapists, not in form certainly, but rather through being the instruments of my own healing. By my remembering that the goal of therapy is *my* healing... I remember to join with my patients in love by choosing against the thoughts and feelings that had kept us separate. Together then we join with the peace that comes only from the loving presence of God (or whatever name you give), who is the true healer. (p. 410)

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