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# Synthesis and Plurality: Stories of the Self

Jason Wright

This essay was inspired by an epiphany, which occurred whilst on a lonely holiday to Turkey in 1997. As I lay beside my hotel pool exhausted from looking at rocks piled up by the ancients, it occurred to me that ideas live in us as we live in the world. We are the medium of ideas—they live, breed, and die in us. I became fascinated with this as process, and as imagery that helps me describe the work I have done over the last 12 years treating people who are struggling with addiction.

I work at the CORE Trust, a London-based center that uses a holistic multi-disciplinary approach to addiction involving complementary therapies and psychotherapy (individually and in groups), with the whole project held as a community. In this context we understand the unifying intention to all the therapies is a spiritual one: we work within a transpersonal metaphor and see the fundamental issue facing the addicted person is the choice of whether or not to live: to live even in the face of devastating early-life trauma and alienation, inadequate parenting and dysfunction.

In its raw form this basic question is an insoluble and often torturous dilemma: Should I live, or not? Here, the assumptions about the nature and qualities of the self that are at stake remain unexamined. In therapy this question can and often does transform into the more useful question, What self am I, that I might want to live? Although narcissistic, this question opens the door to useful inquiry. From here it becomes possible to explore how the self-image of the client is organized, and how its organization might be made secure enough to be sustained over time.

From a Buddhist perspective, of course, this self is an illusion. However, this is not simply the end of the matter. Rather, it piques us with the question, What is this self that I experience? Following from the imagery above and my multidisciplinary work at the CORE Trust (note, readers interested in learning more about CORE are encouraged to visit [www.coretrust.co.uk](http://www.coretrust.co.uk)), I was unable to sustain my image of self as a “thing” (i.e. ontically and diachronically secure). Rather, it seems to me, in a semiotic and narrative context, that an image of self exists at the point where a person’s inner conscious and unconscious stories and outer stories of community and culture meet. This self-image is identified as me. However this is not a self as thing but as a process

that alters with the ever-changing tides of inner and outer narrative.

Here I am thinking about process as does Pickering (1999) in terms of Alfred North Whitehead’s process philosophy. Whitehead (1933) considers transitional processes, structures of activity, and the evolution of those structures to be inherent in the character of reality, in the “continual creative advance of nature.”

If the self is also such a process, then the key to transformation in psychotherapy is moving beyond the personal self to the process behind it: transcending the fixed ideas of self and encountering the self as an ongoing process. The focus moves away from the artifact of this process (i.e., the personal self) and into the process itself. Following Pickering’s argument, I would view these processes as being essentially semiotic in nature—that is, composed of culturally-meaningful signs—and negotiated through narrative. Here then we return to the inspirational images that open this short paper. Access to this process would then mean access to the possibility of more effective and more useful narratives, a process that can radically change the self-experience of the client. Here we meet James Hillman’s (1983) idea that you need to heal the story, not the person.

How do we approach this? What might be the mechanism of this self-process? In his book, *Approaches to Consciousness* (2004), Les Lancaster brings together cognitive neuroscience and mysticism to explore the nature of consciousness. I shall use his ideas here to think about how we might generate and sustain the process of self, how we might think about redefining those narratives, and the cultural milieu from which they arise.

For the purposes of understanding consciousness, Lancaster recognizes the link between cognitive neuroscience approaches and mystical approaches. For example, consider the following elucidation of the perceptual process as understood by Abhidhamma practice seen in conjunction with processes of consciousness as defined by cognitive neuroscience. Lancaster identifies the fact that the process of identifying a “self,” or “I-tagging,” comes late in this sequence of six events that make up the perceptual process.

There are six stages in Lancaster’s model of this process:

1. In the process of seeing an object, a set of neurons fire

- and are analyzed through the visual cortex.
2. The memory process responds to the input.
  3. Various schemata are activated through neural resonance.
  4. Identity of an “object” is established separate from the background information.
  5. For Lancaster, this is the moment when the I-narrative and the perceptual process come together. The perceived object is incorporated in the individual’s ongoing meaning narrative. In Abhidhamma this is known as *javana*. There is no literal translation for the word *javana*, but it conveys an active role in the perceptual process—there is a clear transition from perceptual mechanism to narrative.
  6. Finally, memory is updated by relaying back the current perception, including the narrative interpretation.

The important feature to grasp is that this activity goes on outside of normal awareness. The sense of I-ness is added prior to the normal waking experience of consciousness, but late in the perceptual process. Under mundane conditions the nature of I-tagging is powerful. The sense of self is continually reinforced by registering new I-tagged perceptions into the individual-meaning narrative.

The advantage of studying this process from a mystical perspective such as Abhidhamma is that it points out this deconstruction of the perceptual process. Lancaster suggests that such deconstruction, through meditation or other mystical processes, offers the opportunity to decrease the reinforcing nature of the I-tag, and thereby allows the possibility for a greater number of associative schemata to reach consciousness.

Here then we are back to the key for transformational process in psychotherapy: moving beyond the personal self-image to the process behind it, to the thoughts of the world, or the mind of God. Through altering the relationship between the narrative of self and the narratives of experience, it becomes possible to develop more effective and more useful narratives. Here we are immediately into the ground of psychotherapeutic work, be that in a classical psychoanalytic frame such as a Winnicott’s (1951) model of transitional space or a Hillman’s (1983, 1996) view of narrative reconstruction or soul making from a case history to teleological soul history.

How does this operate in my practice as a transpersonal psychotherapist working with addicted people? The essential frame is to effect a de-identification with the self- image within “me” in order to imagine differing possibilities. The goal, if there is one, is to develop an overarching narrative with the client, one that

enables the client to cope with his or her experience creatively rather than destructively—a narrative that is open and containing rather than destructive and constricting. Sometimes I feel as if I lend an alternate self to the client—both as a stop-gap tool for coping and as an example of the narrative reconstruction process—until such time as the client grasps the process enough to do his or her own reconstruction.

Working with a client in this way requires some skill and art at perceiving the individual content streams within the client’s narrative and then helping the client to re-weave them. Perhaps the best way to illustrate it is with a brief clinical example:

B was 41 at the time of presentation. Her father had been deceased for 10 years, her mother was still alive, and she had one sister. She had been treated violently by both parents throughout her childhood. She left home and school at age 15, but had gone on to work in demanding and prestigious jobs. These are the bare bones of the personal narrative, with significant defining features such as violence, death, and action in the world.

The client presented to CORE with alcohol, poly-drug habits and difficulties with eating. In individual therapy she identified her violent and abusive experiences in childhood as causing problems, particularly with respect to difficulties in relating to people, a tendency to isolate herself, chronic low self-esteem and habitual self-destructiveness. The client’s narrative of these symptoms as drivers of her addictive behavior indicated a compatibility between her ideas and those held by CORE as an institution. Here is the experience of shared narrative ideas that is essential to developing the therapeutic work.

B attended well during her time at CORE, but experienced initial ambivalence toward the community. She found it difficult to talk in group, and would lay down on the floor hiding her face, speaking rarely, and then not in a self-disclosing manner. Here the CORE narrative and her personal narrative came into conflict. It was not possible for her to determine the safest way to meet the needs of the CORE project as caregiver, so she attempted to control the situation by evoking her familiar narrative cycle of non-compliance and the violence it historically evoked. Within the analytic frame of repetition compulsion, the kernel of the story is here.

Concurrently in her individual therapy, the client and her therapist explored issues of trust and relationship, examined her difficulties with shame, and her linkage of violence and intimacy. Toward the end of the fifth month, B was beginning to recognize that she had agency in relationship and was not simply the victim of

circumstance. Here we evidence a fundamental alteration of the client's narratives in relation to herself, CORE, and perhaps to a normative narrative. She was able both to contain and reveal difficult feelings and the story behind them, whilst developing a new overarching narrative in which she was no longer trapped in her circumstances as a victim.

However, the client's non-compliant behavior in group was still at issue. The conflict between the two narrative streams became unbearable and she relapsed into addictive behavior. Ultimately the newfound story, and new self-image, contained her and, in this context, historic experiences that had previously been unbearable began to emerge into consciousness. Over the next few months the client explored many of her intimate relationships, particularly with members of her immediate family. Most significantly, she was able to bear the memory of her father's sexual abuse. She considered that she might be able to pull the parts of her self together to feel more whole.

Her personal narrative was being negotiated within the containing narrative framework of CORE, and a deeper sense of self slowly emerged. As part of this process, she read her own case history. In response she wrote:

It's very strange, and enlightening, to read a case history of yourself, someone else's version of your narrative. Firstly of course it isn't long enough; it doesn't begin to explain the circumstances or the level of distress that I felt to start using when I was 12. Before alcohol, I self-harmed: burning myself, bouncing my head off walls, stitching my fingers together, trying to find a way I could cause myself more pain than what I already felt, but couldn't understand. My linear narrative didn't start until I was nine, just fragmentary memories of ages. Alcohol made me not feel pain, as later did heroin, tranquilizers, and cannabis; cocaine and speed made me not care whether I felt pain or not. When I got to CORE, I'd used alcohol for 29 years and drugs for 26.... Substance free, it became apparent that there wasn't a time without the feelings that made me want to self-destruct.... Through CORE I have repaired myself enough to attempt a fulfilling, clean and sober life, and I am fortunate that support is available through CORE's weekly after-care treatment that I attend. Another strange thing is how completely different I feel for the vast majority of the time. I still have bad days when I plummet to the depths of despair and self-hatred instantaneously, but I can contain my feelings without using. That is true liberation.

As of this moment, the client is still in psychotherapy and has remained clean for 15 months since leaving CORE. She is continuing in higher education.

It is through the interaction of differing narratives that such changes in the client's narrative stream were possible. She became capable of tolerating her experiences and re-envisioning herself; this new and more useful self-image better contains her narrative and her experiences.

We are back to the main idea for defining self: a set of confluent narratives woven into a master narrative, which through time and the process of the psyche develop into the image or icon called "self." Through deconstruction of the narrative stream it is possible to engage the underlying process and avoid over-identification with the images it throws up. Transpersonal psychotherapy is not just about the *content* of our being, but also learning to be aware of the *context* within which we experience being itself.

That the self advances and confirms the myriad things is called delusion.

That the myriad things advance and confirm the self is enlightenment.

(Aitkin, 1985, p. 232).

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