

## **The Healing Potential of Non-Ordinary States of Consciousness.**

(Walter Mead interviewing Stan Grof)

**Walter:** You have now spent over thirty-seven years studying NOSC, pursuing with great dedication research in a field that has not received much attention in academic psychiatry. Why do you find it so interesting and important?

I believe that the study of NOSC is absolutely essential for understanding the psyche, human nature, and the nature of reality. If you look at human history, and spiritual history in particular, NOSC have played a very important role in all ancient and pre-industrial cultures and were held in great esteem. The Western industrial civilization is the only group in human history that does not have any appreciation for these states and any use for them.

**Walter:** What are NOSC; how would you describe them?

NOSC are characterized by dramatic perceptual changes, intense and often unusual emotions, profound alterations in the thought processes and behavior, and by a variety of psychosomatic manifestations. The emotions can range from profound terror to ecstatic rapture and the content of these experiences is often spiritual or mystical. It involves sequences of psychological death and rebirth and a broad spectrum of transpersonal phenomena, including feelings of oneness with other people, nature, the universe, and God, past life experiences, and visions of archetypal beings and mythological landscapes as described by C.G. Jung. There exist many different forms of NOSC; they can be induced by a variety of different techniques or occur spontaneously, in the middle of everyday life.

**Walter:** What are some of the ways of inducing NOSC?

The methods of inducing NOSC cover a very wide range. Ancient and aboriginal cultures have spent as much time and energy developing techniques of inducing such states as we do trying develop ways of suppressing them when they occur spontaneously. The aboriginal cultures combine in various ways drumming, rattling, rhythmic dancing, chanting, fasting, social and sensory isolation. Even extreme physical pain has been used as a means of inducing NOSC. Examples of this are the okipa ceremony of the Mandan Indians or the Lakota Sioux Sun Dance. These various means of altering consciousness have been used in the context of shamanic procedures, healing ceremonies, and rites of passage. Rites of passage are powerful rituals enacted at the time of important biological and social transitions, such as circumcision, puberty, marriage, or birth of a child.

**Walter:** Your early research was focused on clinical use of psychedelics; would not ritual use of psychedelics fall in this category?

Yes, very much so. Psychedelic plants belong to the most powerful means of inducing NOSC. Preparations from the leaves and resin of hemp (*Cannabis sativa*) have

been used for ritual, healing, and recreational purposes by such diverse groups as the Indian Brahmins, the Skythians, certain orders of sufis, some African tribes, and the Jamaican Rastafarians. Some of the best known psychedelic plants come from Central and South America. We can mention here the Mexican cactus peyote (*Anhalonium Lewinii*) and the Mexican magic mushrooms (*Psilocybe mexicana*). There are indications that these were used already in Pre-Columbian times (mushroom effigies and pictures in Aztec codices, ritual administration of peyote enemas depicted on Mayan vases, etc.). They represent to this very day important sacraments in the rituals of native American groups- *Psilocybe* mushrooms for the Mazatecs, peyote for the Huichols and the Native American Church. The Huichols have portrayed their peyote visions in beautiful yarn paintings.

The Indians in the Amazonian region prepare a powerful potion from a jungle liana (*Banisteriopsis caapi*) and some other plants of the rain forest called ayahuasca or yajé, which has a great reputation as a remarkable medicine, as well as sacrament. The visionary world of ayahuasca is equally rich in colors as that of peyote, yet it has its distinct characteristics. The African natives use in their rituals the bark from a shrub called eboga. In medieval Europe, certain covens of witches used powerful mixtures of psychoactive plants in the form of ointments and brews to induce the visions of the Witches' Sabbath. These visions have been depicted on many medieval woodcuts and etchings.

**Walter: What about the different spiritual practices developed in the context of the great religions of the world; some of them can also induce NOSC, can't they?**

Yes, that is another very important category of procedures that can profoundly influence consciousness. We can mention here systematic spiritual practice involving various forms of meditation, concentration, movement meditation, prayers, fasting, breathing exercises, different systems of yoga, or tantric rituals that are described in various Hindu scriptures or the texts of Vipassana or Zen Buddhism, Tibetan Vajrayana, or Taoism. Similar elements can be found in Christian mysticism, the Jewish Cabalah, and other mystical traditions. In Christianity, it is for example the hesychasm, or Jesus Prayer, or prolonged stay in the desert, combined with fasting, sleep deprivation, dehydration, and even physical self-torture, as we know it from the lives of Christian saints and Desert Fathers.

Here belong also the techniques that were used in the ancient mysteries of death and rebirth, such as the Egyptian temple initiations of Isis and Osiris and the Greek Bacchanalia, rites of Attis and Adonis, or the Eleusinian mysteries. The specifics of the procedures involved in these secret rites have remained for the most part unknown, although it is likely that psychedelic preparations played an important part. This was suggested in the book *The Road to Eleusis* by Wasson, Hofmann, and Ruck, based on serious scholarly research.

**Walter:** The range of the techniques for inducing NOSC is quite remarkable. What function and purpose did NOSC have in ancient and pre-industrial cultures?

As some of the examples I have already given show, they were extremely important for the spiritual and ritual life of these cultures. The visionary states provided for them direct experiential access to other levels and dimensions of reality, to the sacred realms (or "numinous" realms, as C.G.Jung preferred to say), and to archetypal beings (deities and demons). They also made it possible to connect in an entirely different and more profound way with the animal and botanical kingdom and the forces of nature, as well as each other. The anthropologist Victor Turner referred to this aspect as creating a sense of "communitas". In rites of passage, NOSC helped to provide a clear transition from one social category to another, for example, in puberty rituals the move from childhood to adulthood.

But that is not all. NOSC were used for diagnosing and healing emotional, psychosomatic, and even some somatic disorders. Although pre-industrial cultures also have had various herbal and other naturalistic remedies and interventions, healing was for them has always been associated with NOSC. The healer is in a NOSC, the client, a group, or the entire tribe, as it is, for example, among the Kalahari Bushmen. Another use for NOSC has been cultivation of intuition and extrasensory perception- finding lost objects and persons, determine the move of the game, etc.). And tapping deep sources of artistic inspiration is yet another use of NOSC.

**Walter:** Some of the ancient mind-altering techniques have been studied by modern researchers and some new ones have actually been developed by modern researchers. Can you say something about that?

Laboratory research has demonstrated that meditation can have very distinct effect on the brain waves, increasing significantly alpha and delta waves. It has also been shown that shamanic drumming and the drumming rhythms that have been developed empirically by various native groups (e.g. African tribes) has also a profound effect on the brain wave activity. Among the modern means of inducing holotropic states of consciousness are psychedelic substances isolated from plants or synthesized in the laboratory and powerful experiential forms of psychotherapy, such as hypnosis, primal therapy, rebirthing, or the Holotropic Breathwork.

There exist also very effective laboratory techniques for altering consciousness. One of these is sensory isolation which involves significant reduction of meaningful sensory stimuli. In its extreme form the individual is deprived of sensory input by submersion in a dark and soundproof tank filled with water of body temperature. Another well-known laboratory method of changing consciousness is biofeedback, where the individual is electronically monitored and guided with the help of feedback signals into NOSC characterized by preponderance of certain specific frequencies of brainwaves. We will see in the near future extremely effective machines using modern technology to alter consciousness; some of them, including the virtual reality technology, are already quite advanced.

**Walter: NOSC have played such an extraordinary role in human history, particularly as far as spiritual life is concerned. What has been the position of Western science, more specifically psychiatry and psychology, in this regard?**

This is a very interesting issue. There was a brief period at the turn of the century (end of the 19<sup>th</sup> and beginning of 20<sup>th</sup> century) when professionals showed a very keen interest in these states. The cases of multiple personality and possession attracted much attention and Pierre Janet wrote an extensive study on this subject. Hypnosis was widely used in the work with hysterical patients and MMPD. Sigmund Freud, the founder of psychoanalysis and depth psychology, was deeply influenced by his visits to the two most important centers where hypnosis was practiced- the Salpêtrière in Paris (Martin Charcot) and the school in Nancy (the work of Liébault and Bernheim).

The inspiration for psychoanalysis came from observations of spontaneous NOSC of a young woman, Miss Anna O., a patient of Freud's friend Joseph Breuer. She experienced spontaneous episodes of NOSC during which she relived various traumatic memories from childhood and as a result of it felt better. She called these sessions with Breuer and Freud "chimney sweeping".

Freud actually initially used hypnosis for his psychoanalytical explorations and summarized his observations in the book **Studies in Hysteria** written jointly with Breuer. At that time, he suggested as treatment for neuroses reliving of past traumas in NOSC; later he changed his position in favor of free association and analysis of transference. It was largely due to Freud's authority that the interest moved away from the study of NOSC. At present, many professionals feel that this change of strategy set psychotherapy on the wrong track for many following decades.

In the 1920's, there was a brief period of interest in clinical experiments with mescaline, pure alkaloid isolated from peyote. This period was closed by an authoritative book by Kurt Beringer **Der Meskalinrausch** (The Mescaline Intoxication), which dismissed the experiences induced by this psychedelic as a "toxic psychosis", a kind of phantasmagoria caused by brain poisoning. These experiments did not attract much attention either by the therapists or by general public.

**Walter: That was quite different when LSD appeared on the scene!**

It certainly was! Albert Hofmann's serendipitous discovery of LSD caused a real sensation in the scientific world, as well as generated great interest in the general public. It became a major inspiration for psychopharmacology, started a new chapter in psychotherapy, and led to a renaissance of interest in NOSC.

But psychedelics were just the beginning; they were followed by other avenues of research in NOSC: near-death experiences, sensory deprivation, alpha and theta biofeedback, and the development of powerful experiential techniques of psychotherapy that can profoundly change consciousness- primal scream, rebirthing, bioenergetics, Holotropic Breathwork, and others. We should also mention the amazing increase of

interest in Eastern spiritual practices- different systems of yoga, the Tibetan Vajrayana, Zen and Vipassana Buddhism, or sufism, as well as shamanism and spiritual practices of native cultures.

**Walter:** And in spite of the historical importance of NOSC and the large amount of data generated by modern consciousness research (basically validating the ancient wisdom), Western academic psychiatry and psychology have largely ignored all the material related to NOSC and remained impervious for the old/new revolutionary information. What do you think is the reason for this?

I believe that this information is simply too radical, too revolutionary. It shatters the most fundamental philosophical assumptions of Western science and is too threatening to the established ways of thinking. The new data could not be handled by some minor adjustments, by a few *ad hoc* hypotheses; it would require a radical overhaul. In my opinion, it would cause a paradigm shift comparable to what happened in physics after the Michelson-Morley experiment and the discovery of radioactivity and X-rays, with the advent of the theories of relativity and then quantum physics. The changes would actually go in the same direction, they would show convergence with the changes in physics and be compatible with them.

**Walter:** Has your research shown you what are the shortcomings of traditional psychiatry and psychology and where the problems are?

After more than thirty-seven years of study of NOSC, I have come to the conclusion that Western psychiatry and psychology have developed a superficial and distorted image of the human psyche. This is then reflected in an inadequate understanding of emotional and psychosomatic disorders and in generally ineffective treatment. Current psychiatric therapy represents an uneasy marriage of routine suppressive psychopharmacological medication aimed at controlling symptoms with talking therapies, which are very weak tools for self-exploration.

And I feel that the major reason for these shortcomings is the fact that academic psychiatry and psychology have systematically ignored the experiences and observations from NOSC. Michael Harner, an anthropologist of good academic standing who also experienced a shamanic initiation during his field work in the Amazonian jungle, suggests that our Western psychology is seriously biased in at least two significant ways. First, it is ethnocentric, which means that it considers its own view of the human psyche and of reality to be the only correct one and superior to that of all other cultural groups.

When a traditionally trained psychiatrist comes to India and observes the practices of the yogis or sadhus, or studies the Mexican or native American shamans, he or she would diagnose them as psychotics, or ambulant psychotics at best. However, it works both ways. When a shaman from a culture that has a close connection to nature comes to a place like Los Angeles- not necessarily at the time when its people were burning their own house, but on an ordinary LA day- he or she would think the entire Western culture has been seized by an incomprehensible insanity.

We have covered every square yard of the earth (from which we come, that nourishes us, and on which we critically depend) with asphalt and cement and are in mad pursuit of more money, possessions, power, and fame, while we have polluted the air to such an extent that we cannot breathe any more and are seriously questioning the safety of our water and food. People are hospitalized and receive pathological diagnoses for having past life experiences or experiences of cosmic unity, while those who are spinning insane scenarios of atomic war that would destroy life on the planet are not only running free, but enjoy positions of power and respect. This is what is meant by ethnocentric criteria for mental health.

**Walter:** You mentioned that Michael Harner talks about a second bias; can you say more about that?

Yes, he calls the second bias "cognicentric" (a more accurate word might be "pragmacentric"); it refers to what I have already mentioned. Mainstream psychiatric and psychological theories take into consideration only experiences and observations in the ordinary state of consciousness. A disinterest in NOSC, disregard for them, and unwillingness to face the existing data has resulted in a culturally insensitive approach and a tendency to pathologize all activities of other cultures that cannot be understood in terms of the current narrow conceptual framework. This includes the ritual and spiritual life of ancient and pre-industrial cultures and the entire spiritual history of humanity.

**Walter:** Can you give some specific examples how we have pathologized the spiritual history?

Traditionally trained anthropologists argue if shamans should be considered ambulant schizophrenics, epileptics, or hysterics. Mainstream psychiatric literature contains many articles and books that discuss what would be the best clinical diagnosis for founders of various religions and their saints and prophets. St. John of the Cross has been called a "hereditary degenerate", St. Teresa of Avila dismissed as a severe hysteric, and Mohammed's experiences have been attributed to epilepsy. Other religious and spiritual personages, such as Zarathustra, Buddha, Jesus, Ramakrishna, and Sri Ramana Maharishi have been relegated into the realm of psychosis.

Traditional psychiatry does not make a distinction between a psychotic experience and a mystical or spiritual experience; it sees every NOSC as a manifestation of serious psychopathology, as an indication of mental disease. From the mainstream point of view, Genghis Khan, Hitler, and Stalin would actually get away with a more lenient diagnosis than Buddha. They might be seen as severe psychopaths, whereas Buddha with his visionary experiences of Kama Mara and past life experiences would be clearly labeled as psychotic. The famous psychoanalyst Franz Alexander, known as one of the founders of psychosomatic medicine, wrote a paper in which even Buddhist meditation is described as "artificial catatonia". You cannot even meditate, be involved in a spiritual practice without getting a pathological diagnosis.

**Walter:** You and your wife Christina have tried to correct this situation and have coined the term "spiritual emergency" for some dramatic NOSC, implying that these are not necessarily pathological. Can you say something about it?

We believe that there are many dramatic episodes of NOSC which resemble or are even identical with those experienced by novice shamans in the initiatory crisis, by Christian and Buddhist monks during systematic meditation, or by people during Kundalini awakening. When properly understood and supported, they can result in emotional and psychosomatic healing, positive personal transformation, and even consciousness evolution.

**Walter:** You have certainly described a long list of shortcomings of present psychiatry and psychology. Has your research provided any clues what the new science of the human psyche would look like, one that is not ethnocentric and cognicentric, but honors the entire spectrum of human experience, including NOSC, and shows respect to ritual and spiritual activities of people of all cultures and historical periods?

If we study systematically the experiences and observations associated with NOSC, this leads inevitably to a radical revision of our basic ideas about consciousness and the human psyche and to an entirely new psychiatry, psychology, and psychotherapy. The changes we would have to make in our thinking fall into several large categories:

1. The nature of the human psyche and the dimensions of consciousness. Traditional academic psychiatry and psychology uses a model which is limited to biology, postnatal biography, and the Freudian individual unconscious. This model has to be vastly expanded and a new cartography of the psyche has to be created to describe all the phenomena occurring in NOSC.

2. The nature and architecture of emotional and psychosomatic disorders (or what is traditionally called psychogenic psycho-pathology). Traditional psychiatry uses an explanatory model limited to biology and biographical traumas in infancy, childhood, and later life. The new understanding has to include additional realms of the psyche as potential sources of emotional problems. These are transbiographical and transpersonal in nature.

3. Therapeutic mechanisms and the process of healing. Traditional psychotherapy knows only therapeutic mechanisms operating on the level of biographical material- remembering of forgotten events, lifting of repression, reconstruction of the past from dreams, reliving of traumatic memories, analysis of transference, etc. The work with NOSC reveals many important additional mechanisms of healing and personality transformation operating in realms that lie beyond biography.

4. Strategy of psychotherapy and self-exploration. The goal in traditional psychotherapies is to reach an intellectual understanding as to how the psyche functions and why symptoms develop and derive from this understanding a strategy how to "fix" the patients. A serious problem with this strategy is the amazing lack of agreement among

psychologists and psychiatrists about these fundamental issues, resulting in an astonishing number of competing schools of psychotherapy. The work with holotropic states shows us a surprising alternative and a way out of this confusion, which I will discuss later.

5. The role of spirituality in human life. Western materialistic science has no place for any form of spirituality and considers it incompatible with the scientific world-view. Modern consciousness research shows that spirituality is a natural and legitimate dimension of the human psyche and of the universal scheme of things. In this context, it is important to distinguish spirituality from religion.

6. The nature of reality. The necessary revisions which I have discussed up to this point were related to the theory and practice of psychiatry, psychology, and psychotherapy. However, the work with NOSC brings challenges of a much more fundamental nature. Many of the experiences and observations that occur during this work are so extraordinary that they can not be understood in the context of the Newtonian-Cartesian materialistic paradigm and undermine the most basic metaphysical assumptions of the entire edifice of Western science.

**Walter:** Could you say something more specific about the different points you have just raised?

What would follow is a free discussion of all these six points, where you could lead me with questions step by step. I did not feel the need to elaborate verbatim, but I am enclosing a paper on the same topic which will give you an idea what I would be talking about.

**Walter:** You have described the necessary changes in very general terms. Can you describe what the actual therapeutic practice would look like, if it follows these new principles. How do you conduct therapy these days, after all these years of experiences?

My new understanding of the psyche, of emotional and psychosomatic disorders, and of the therapeutic process emerged from my early psychedelic research. This is where I learned much about the dimensions of human consciousness, the inner healing intelligence of the psyche and the body, and our spiritual nature. My psychedelic therapy work in the later years followed the principles that I described earlier. Unfortunately, as you know, psychedelic research is virtually non-existent these days.

In the last seventeen years, my wife Christina have developed and have been practicing Holotropic Breathwork, a very powerful non- pharmacological method of self-exploration and therapy that is using extremely simple means- accelerated breathing, evocative music, and focused energy release through a certain form of body work. Using this approach, we obtain surprisingly intense and deep NOSC that involve the same spectrum of experiences that we used to see in psychedelic sessions. It is a very effective method of healing and personal transformation.

**Walter:** Can you tell me more about Holotropic Breathwork: what it is and how it is done?

Here starts our discussion about Holotropic Breathwork with the segment from the actual session and sharing. You have experienced this and are familiar with the procedure. I do not think it is necessary to follow a screenplay; we can just chart the basic strategy before filming the interview. I will think about it and prepare a rough outline.