

Integral Approach to Mental Suffering

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This article further develops one section by the same name in another article published in the *International Journal of Transpersonal Studies* entitled Integral Approach in Transpersonal Psychotherapy (Boggio Gilot, 2003) by proposing a model of mental suffering based on uniting scientific psychology with meditative wisdom (e.g., derived from Yoga Vedanta). The role of spiritual vision underlines a wider understanding of the origins of mental suffering, including damage from ontological unawareness and egoism, non-ethical factors usually ignored in psychology. These give rise to destructive poisons of the mind such as pride, greed, fear, resentment, envy, and intolerance, which characterize egoic narcissism. This comparative approach to psychology and meditative wisdom allows for an expansion of developmental and psychotherapeutic theories.

Within the perspective of Western psychology, psychotherapy deals with a complex range of suffering involving physical, emotional, cognitive, and behavioral states, which affect persons' relation to life and produce an intimate and existential suffering that undermines the achievement of personal and interpersonal goals. In particular, it hurts the quality of individual freedom and frequently its aims. Mental suffering always involves drives, feelings, thoughts, and behaviors, and manifests itself through the subjective expression of painful emotions and distorted thoughts, as well as through objective behaviors of a destructive and irrational type.

These painful states of sentiment may produce alterations in the sense of reality and antagonistic and separative attitudes in the inner and outer world, thereby hindering any harmonious integration in the intrapersonal and interpersonal relationships. To cure this inner suffering, psychotherapy uses the therapeutic relationship, but there is no univocal view of this clinical art. There are various schools of psychotherapy, each based on a set of notions on the nature of the human person and of health and suffering, developed according to a given cultural paradigm and the corresponding philosophy and world vision, which is the context of the science of psychotherapy. We thus see great differences in the so-called four forces of Western psychology: psychoanalysis, behavioral and cognitive psychology, humanistic psychology, and transpersonal psychology.

The former two, psychoanalysis and cognitive-behavioral psychology, are the product of the mechanistic paradigm and the materialistic vision that restricts reality to the physical universe. Humanistic psychology includes existential philosophy and systemic science in its embrace, as the human being is primary and central to its vision. Transpersonal psychology, however, is based on a vision of the human being and the world that includes spiritual reality and considers its experience and expression as the utmost peak of psychological growth.

The study, interpretation, and vision of mental suffering are strictly connected to the vision of the world and the human person on which are based the above psychological and psychotherapeutic theories. In the conceptions born in the framework of mechanistic and materialistic science, the reading of suffering takes place in the context of personal biography and connects to a disturbance of the instinctual-affective dimension that is close to the biological life, in which context it is studied and dealt with. When human existence is only seen associated to bodily life, even the psychological experience is seen as the result of the person's contact with the surrounding physical and relational world, and each reaction is attributed to positive or negative experiences in the world. There being no possible assumption that life may originate before birth and may be independent of external experience, the causes of personal suffering are all looked for in the context of personal

biography and the relations with the environment, parents, and society. Thus, in the psychoanalytic literature, the mental suffering, called psychodynamics, is all in the incapability of adapting to reality, because of impulses that cannot be regulated by reason or morals—often reduced to some maladjustment in the so-called “object relations,” where object basically stands for the parental figures. The psychoanalysis requires going back to early history and the interiorized experience of object relations. The goal is a normal social adjustment, for which what is needed is to restructure the malignant internal objects and their structural by-products that in turn cause the conflicts, complexes, and inhibitions of personality that make it difficult to establish satisfactory social relations.

In behavioral and cognitive psychology, mental suffering consists of a disturbance of the construction of thought due to a negative conditioning of the environment. Therapy requires revising the texture of thought and freeing it from the dysfunctional constructions in order to reach a satisfactory adjustment to social reality.

The humanistic-existential view largely refers to a vision of the world extending from the mechanistic-materialistic context to the recognition of the interdependence of the various human, ecologic, and cosmic systems—even the conception of suffering changes. The human being who recognises himself as part of a wider universe than family and society is in search of a goal and a task going beyond simple adjustment. The reading of symptoms, in this context, looks at not only the damages of interpersonal and socio-cultural relations, but also at the inhibition of a free relation with existence due to the lack of meaning and the lack of free expression of one’s creativity. The humanistic-existential conception underlines that the cause of suffering lies not only in early life events, but in the repression of one’s emotions, talents, and most authentic values—a crushing of the truly original tendencies of the person which hinders the natural track of self-realization and the expression of higher fundamental needs. Healing here requires the courage to exist with one’s ideas and one’s values, as well as finding an existential direction capable for facing the great themes of life—the result being otherwise to fall into discouragement, boredom, insignificance, and eventually despair. Whereas the therapy of psychodynamic suffering considers the dysfunctional object relations and requires going back to the patient’s past and transforming those elements that hinder the

adjustment to reality, existential therapy of suffering requires going beyond adaptation and conformity and, instead, living according to one’s real nature, free from the need of confirmation from others and conventional safety.

This means that adaptation, which for ordinary psychodynamic suffering is the goal of a much longed-for normality, becomes an unbearable limit from the perspective of existential suffering. As Jung himself had to note on this issue, “to be normal is a splendid ideal for those who are a failure, for those who have not been able to adapt. But for the ones who are more capable than the average, for those who never find it difficult to be successful and do their share in the world, to be bound to normality is a Procrustean bed, an unbearable bore, an awful sterility and desperation. It so happens that many persons become neurotic because they are just normal, whereas others become neurotic because they are unable to become normal” (Jung, 1939).

With transpersonal psychology, a suffering is described that relates to the separation of the ego from its spiritual essence: this involves not only the deprivation of the most profound values and the lack of meaning in life with the associated feelings of alienation, boredom and despair, but also the lack of connection with the spiritual dimension toward which the individuality naturally tends. Transpersonal psychology underlines a suffering that is more specifically related to the removal of the sublime and the crises faced in the phase of spiritual awakening, which generally occurs around the middle of life.

The various conceptions of suffering all share a least common denominator: the recognition that suffering manifests itself through a state of lack, which reflects the frustration of fundamental human needs. The psychodynamic conceptions, more related to early biographic experiences, refer to the primary needs of safety, love and esteem, whereas the humanistic-existential conceptions refer to the needs of growth, self-realisation, and meaning. The transpersonal conception refers to the lack in the needs of connection with the Sacred, of knowledge, truth and self-transcendence. Here, going back to a spiritual cultural context recognizing the unity of life and its transcendent matrix, it appears that the greatest source of suffering is the ontologic ignorance, the deprivation of a contact of individual life with the universal life, due to the identification with the historical ego, immersed in the outer flow and separated from developmental and ideal values.

In the spiritual vision, the lack of an encounter with universal archetypes impoverishes individual life: it is the lack of the feeling of belonging to the unity of life that produces the anguish of life and death. Spiritual poverty, due to the ignorance of one's essence, condemns one to compensate through the importance of the sense of the ego, confined to the body and its attachments while unable to grant safety and continuously generating conditions of separateness, fear, anxiety, and aggressive defensiveness.

The application of the principles of transpersonal psychology is based on the following developments of transpersonal psychotherapy. In the words of Walsh and Vaughan (1993), transpersonal psychotherapy aims at the integration of physical, emotional, mental, and spiritual aspects of wellbeing. Its objectives include the classical ones of a normal psychological functioning, adding to these the fostering of human growth and awareness beyond the notion of health as conventionally recognised. The potential of healing implicit in the modification of ordinary consciousness and the validity of the transcendent experience is here strongly underlined. A transpersonal psychotherapist can utilise traditional techniques as well as methods derived from spiritual disciplines, such as meditation and mental training. According to Boornstein (1992), psychotherapy also deals with the psychological processes related to the realization of the states of enlightenment, bliss, transcendence, and mystic union, as well as of the psychological conditions directly or indirectly underlying these events. According to Washburn (1994), a fundamental objective of transpersonal psychotherapy is the integration of the spiritual experience with a wider understanding of human nature and the development of suffering.

Ken Wilber's Integral Approach

Over the past 25 years, the historical development of psychotherapy models has produced a progressive tendency toward an integrative and intercultural approach. This stemmed from the need to coordinate the theoretical and epistemological body of knowledge of the four fundamental schools of psychology and psychotherapy (psychodynamic, cognitive-behavioral, humanistic-existential, and transpersonal—see Table 1), along with psychologies coming from other contexts than scientific ones, such as the meditative traditions. The aim is to go beyond the atomistic and totalitarian vision of the scientific model that has ignored the discoveries of others and the intercultural aspects.

This tendency has emerged in the *International Journal of Psychotherapy* (2002), with special reference to the distinction between the risk of a hybrid syncretism, clearly to be avoided, and a pluralistic model recognising the complementarity of the various conceptions with the aim of a unified and wider vision of psychological distress and the methods to heal it. Integrative conceptions combining psychology and spirituality include the work of Naranjo (1989), the psychology of Almaas (2004), and particularly the integral approach of Ken Wilber (2000), already a leader of transpersonal psychology who brilliantly combined the theories and methods of Western psychology with the wisdom of meditative traditions. According to Wilber, human totality is composed of body, mind, soul, and spirit. Development occurs through a process of integration of the potentialities of these levels in an arch that goes from a prepersonal-prelogical-preegoic stage, to a personal-logical-egoic, and then to a transpersonal-translogical-transegoic one. At each stage, specific disturbances are possible and therefore specific psychopa-

Table 1.

Conceptions of mental suffering

Psychoanalytic	Incapability of adapting to reality, due to dysfunctional object relations
Cognitive	Disturbance of the construction of thinking and of the systems of differentiation and correlation, due to a negative conditioning
Humanistic-existential	Failure of self-realisation, due to frustration of the needs of growth and lacking sense of existence
Transpersonal	Removal of the sublime and conflicts inherent to spiritual crises

thologies, requiring an accurate differential diagnosis and differential healing methods. With this complex spectrum of psychopathological development, Wilber coordinated the psychoanalytic, cognitive, humanistic, and transpersonal conceptions and proposed a new image of an integral therapist capable of working with the different bands of the spectrum. Exploration on meditative states sheds new light on the theories of suffering and psychotherapy, both with respect to phenomenological and prognostic aspects and with respect to the significance of suffering and its developmental value.

Spiritual Vision of Mental Suffering

In the scientific approach, mental pathology is signalled by a suffering exhibiting symptoms and is faced according to a deterministic vision that attributes its origins to a cause external to the patient (e.g., in early traumas due to dysfunctional relations with the family and the environment). In this deterministic frame of reference, mental suffering derives from others: the patient is a victim of external forces, family, or society, making him or her the pathetic protagonist of a painful condition not wanted and unable to be influenced. This strictly mechanistic vision showing us a human being that is manipulated by and a victim of hostile external forces, though partly valid in biographical terms, does not fully account for the reasons of mental suffering nor help the solution of human unhappiness, while on the other hand easily stirring up destructive behaviors.

If one's suffering is attributed to others, ill-feelings and anger naturally develop, and particularly when suffering is exclusively related to early emotional traumas, hate against the parents can burst with unforeseeable outcomes. In a rigidly deterministic context, psychotherapy, rather than being an instrument to foster peace and unity in the family and society may instead increase separation. In this perspective, other negative consequences arise that are hardly coherent with a positive model of mental health.

Seeing the suffering as originated by others, it is only natural to consider that salvation should also come from the outside. The only way to be healed is therefore seen in psychotherapy, and if will or means to access it are lacking, then what is left in front of suffering is to dull one's senses, having recourse to pleasure, alcohol, drug, the alienating hedonistic distraction, and affirming one's power, as means to compensate for the wrongs one considers to be the victim of. When such is

the human condition, suffering is no longer an instrument of contact with oneself, a means of knowledge and growth, but rather becomes an instrument of alienation and loss of a realistic and developmental relation with life. The scientific and materialistic notion of mental suffering lacks both a wise vision of life and ethical considerations: it deprives the patient of a precise responsibility towards his condition, underestimates the human capacity to face suffering, fails to promote the development of good forces, and rather fosters a basic narcissism. To recover, frequently only means acquiring aggressive forces to use in a more intelligent way (see also Boggio Gilot, 1997).

Ancient wisdom, that which derives from the great meditative traditions (especially Yoga Vedanta), has a profoundly different vision of suffering, as well as a different approach to recovery. It emphasises that, although it is true that in ordinary life a great part of human experience is related to suffering, it is also true that only to a small extent does this suffering come from external causes. Mostly, it is instead self-produced and depends on factors that are intrinsic to the self-centered mental state, that is, on basic narcissistic afflictions of a mind that is unaware of its own potentialities and spiritual nature. It is this ontologic unawareness that causes the development of the non-ethical factors and poisons that inhabit the mind and give rise to wrong and separative behaviors.

In this context, because the origin of suffering is in the human being, he is responsible for it, and can overcome it by having recourse to his own inner potentialities, that is, to the development of consciousness, until reaching the spiritual experience that connects individual to universal life (Boggio Gilot, 1993). These goals require a profound knowledge and transformation of oneself.

The spiritual vision is profoundly different from the scientific one, in that it confers responsibility and a central role to the patient, making him no longer an unaware victim but rather the maker of his own destiny. In looking broadly at the sense and nature of suffering, the Eastern view adds a particularly enlightening perspective by emphasizing the central role of karma, that is, the law of cause and effect, which attributes a determinant value to human action with the consequent production of corresponding effects. The inevitable suffering, such as for instance that related to an organic disease or the daily problems of existence, that the Western view attributes to a bizarre and obscure fate, is in the Eastern

view the result of a negative behavior, possibly even stemming from some previous existence, that created negative effects precipitating in the present.

The concept of karma recognises a relative free-will, in the sense that fortune or misfortune is the product of previous behaviors and choices. The present, however, is not only inevitably predetermined, but is also the time when new free actions are promoted, thereby sowing the negative or positive seeds that will sprout in the future.

Close to the concept of karma is Plato's notion of daimon, reconsidered by Hillman (1997), according to which the soul becomes incarnated even in choosing his or her own parents and life events, in order to pass through a developmental process and face the challenges needed to reach liberation. In this context, the suffering that life brings along is in no way accidental, but is rather a significant and liberating element meant to foster the perfecting of the individual and elevation toward the supreme goal of life.

In agreement with the Eastern tradition (e.g., Samkara), Plato outlined that not only suffering does

not derive from others, but also it is highly useful in that it serves to lift up oneself: it has a cathartic value and brings along the possibility to live it as an opportunity of growth and development. In this spiritual perspective, suffering as such is dignified as an opportunity of growth, and responsibility is underlined, in that the individual is at least a co-creator of that which he lives, and has a task. In short, there is a meaning in what happens, and this must be understood in terms of one's own development.

Uniting psychology and the spiritual vision into an integral conception (Boggio Gilot, 2005), it is possible to outline two basic categories of human suffering: (1) There is one type of suffering that has a developmental significance: it is useful because it offers the possibility of a transformation of one's personality and, through this, the opportunity to get rid of a negative karma accumulated in the past. This suffering, if well understood, helps liberation and salvation. (2) There is another type of suffering that is useless and self-produced, in the here and now, through the factors of self-centered unawareness and the consequent poisons

Table 2.

Human suffering according to...

*...the scientific view
of Western psychology*

- All human suffering comes from the outside: the human being is a passive victim and is right to be afraid and to defend himself from external threats.
- Mental suffering is signalled by symptoms stemming from troubled object relations or negative conditionings. The human being is right to be resentful, because he is the victim of the violence of others.
- The healthy mind is identified with the absence of clinical symptoms and its suffering does not require to be cured.
- The unhealthy mind shows symptoms and must be cured countering the symptoms, with no reference to the ethical and spiritual state.

...the meditative tradition

- Part of the suffering is self-produced through wrong doings of the past and the present: rather than being afraid, the human being must take responsibility for his actions by doing right.
- Mental suffering is either the result of a previous negative karma, or the result of the poisons of the unaware and egocentric mind in the here and now. The human being has no reason to be resentful: his task is to proceed towards the understanding and transformation of himself.
- The absence of clinical symptoms does not mean that one is healthy. The healthy mind is the one which is inhabited by ethical factors and qualities that produce the right perception and is united with life.
- The unhealthy mind is inhabited by factors of egocentric unawareness and by poisons that are unethical attributes of illusion and suffering. The cure implies spiritual development.

of the mind. This suffering, caused by wrong doings of the present, is soiled with non-ethical factors and brings along destructiveness, as well as negative effects for the future.

The suffering that is not self-produced and is ultimately useful includes both those disturbances of development deriving from traumas suffered by the child in the family and early environment, as well as the suffering related to unavoidable life events.

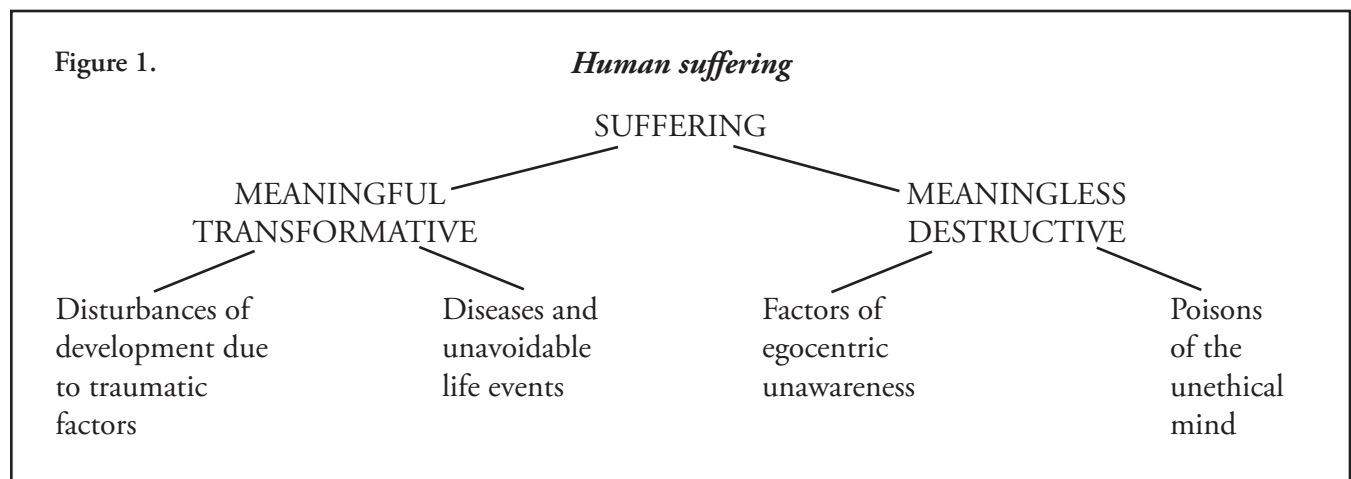
The suffering that is self-produced, instead, stems from a thought lacking wisdom and from narcissistic and non-ethical personal choices. Here lie the roots of that negative assimilation of the frustrating experiences of life and of those reactions of rejection that frequently give rise to clinical symptoms and the maladjusted behaviors of overt psychopathology.

The integral approach is that which takes care of the various forms of suffering with an accurate diagnosis and using tools derived from Western psychotherapy and Eastern meditative wisdom: particularly the practice of ethics and the practice of awareness and transformation of the Yoga Vedanta systems of meditation, considered to be particularly useful for taking care of mental and behavioral suffering (see Table 2 and Figure 1).

As has been pointed out, it is and will become increasingly evident that the only psychology capable of facing the despair, destructiveness, and bewilderment of the modern world will be an integral psychology that includes the wisdom of spiritual traditions. Only these, in fact, possess the methods to foster the awareness of the good forces that every human being carries as inner nature, and only these can foster the trust and the hope without which neither healing nor the peace of the heart will ever be realised (Boggio Gilot, in press).

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