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THE SOUL SPEAKS

Imagine yourself as the parent of a healthy and seemingly thriving fifteen-year-old boy, Tom. One day, Tom falls on the floor and starts making strange movements, something he has never done before. This does not happen just once, but occurs ten times on that first day.

Even though your son does not seem concerned about his new symptom and just wants to go out with his friends as usual, you insist he come with you to the county hospital. You show up in the emergency room, and the nurse triages you to the neurology service as “seizure of new onset.”

You first see the medical student; then the neurology resident comes. Tom starts to look distressed. He first mentions that he is feeling hot and flushed and has a bad headache. He further talks of chest pain and a fear that something bad is getting ready to happen. Tom then loses consciousness for several minutes. He shows some lip-smacking movements. He is easily aroused when cold water is splashed on his face. The resident is concerned, so he admits your son to the hospital. The evaluation is underway.

Your son undergoes an electro-encephalogram, a spinal tap, and a CT scan, as more medical students and residents perform histories and physical examinations. They tell you that all of these tests plus a host of laboratory blood and urine tests are all normal. On the third day, the supervising neurologist, suspecting seizures of emotional origin, suggests in the patient’s presence that the doctor could induce a seizure by pressing on the right jaw and stop the seizure by pressing on the left jaw. After thirty seconds of massage of the right jaw near the ear, Tom loses postural tone and jerked his arms and legs slightly. He stops jerking immediately after pressure was applied to the left mastoid area. This observation results in a psychiatric consultation.

Such was the experience of Tom’s mother. Tom had been physically healthy, and now all of this drama was unfolding. I was the psychiatric resident who met Tom and his mother.

Imagine walking with me into Tom’s hospital room. Tom is angry and distrustful. He resists my questioning him about the events preceding his symptoms. He professes unconcern over his seizures even when I remind him that if he has seizures, he will not be able to drive. We notice that Tom’s manner of relating is very macho. He comments frequently about his fights and brags of his numerous sexual successes with girls. He alleges more than twenty “conquests.” At no time does he mention anything about a trauma.

Tom’s mother, however, is more forthcoming. She informs us that Tom has just finished testifying at the rape trial of two homosexual rapists. It seems that four months before Tom’s admission, he and four friends were enticed into a man’s apartment with the promise of a party. Two adults then tried to rape the boys. A frightening struggle ensued, but ultimately, Tom and his friends managed to escape. During the next several months, he worked with police supplying evidence for the prosecution, and no troubles showed up in Tom during this period.

We confront Tom with our knowledge of his near-rape experience. He is embarrassed and refuses to discuss the details. He adamantly denies any relationship between the attempted

homosexual assault and the seizures, and threatens to sign out against medical advice if this idea is pursued. It is clear: Tom is in no mood for “talk therapy.”

Grasping for any means to discover what was hidden, and knowing I have little time left before Tom is discharged, I searched my mind for any technique that might open things up some more. My thoughts land on hypnosis. In an effort to offer a means of getting to the feelings surrounding the rape in a quicker and more acceptable way, I offer to hypnotize Tom. I explain about hypnosis and suggest that it might allow us to see if there was a connection between his seizures and the sexual incident. This intrigued Tom enough to try, so we scheduled a training session for the next day.

The Soul Speaks through the Body

Most of us recognize that excessive stress can, not only make us tense emotionally, but can also have ill effects upon our body. Besides chronic muscle tension and the aches and pains that go with these, stress can trigger pain in the chest wall or even the heart. Immunological studies have shown that we have a greater chance of infection if we are stressed. Even the development of cancer has been linked to severe chronic stress.

For years, a coaching client of a psychologist suffered from frequent sore throats that no doctor was able to diagnose or treat. When she finally left a relationship that suppressed her ability to speak up for herself, the sore throats disappeared. She healed herself by literally “finding her voice!”

A woman during a very stressful time in her life was diagnosed with supposedly incurable Celiac Disease. This severe illness is from eating wheat gluten when the body is unable to process it. When the stressful time passed, she began joyfully working in the career of her dreams. At that, her Celiac completely disappeared. She eats wheat with absolutely no problems, and this has been confirmed medically. It perplexes her family doctor, but she has been around enough to see other such inexplicable “cures” when stress lets up in a person’s life.

A fifteen-year-old pregnant Hispanic girl arrived in the emergency department with her right elbow held in a flexed position and her left toe pointed downward. When asked about her symptoms, she stated, with little emotion, “I’ll get used to it.” Her presentation could not be explained by any known medical condition. She eventually revealed that her boyfriend, who was the father of the baby, had begun seeing another girl. In passing, the girl remarked that she was so angry with her ex-boyfriend that she wanted to hit and kick him. Note that her symptoms made her unable to do so.

A large part of our soul does not express itself with words. This part is often referred to as the “right brain.” Usually, we have enough freedom to route the right brain’s concerns through the left brain’s speech centers. However, if something happens that is “unspeakable,” our psychological defenses may prevent the right brain from vocalizing and finding relief from its pent-up tensions. Could the pent-up tensions from a near rape be responsible for Tom’s seizures? Was his soul trying to tell us something?

The Soul Speaks through Dreams

Duane was thirty-five when he came to see me during the first decade of my private practice. Duane worked as a successful computer programmer and sought treatment because of an unreasonable and nagging worry that he had left bugs in his computer programs. For the non-technically inclined, a “bug” in a program is a mistake that causes the program to malfunction.

In other areas of his life, Duane felt fine. He had a stable family, he enjoyed his job, and his childhood family was loving and happy. He was married, loved his wife, and prized his

children. Spiritually, though respectful toward Christianity, he was not a Christian and denied having had a personal experience with God. The sudden death of his father when Duane was three years old created the one suspicious stressor in his younger life. Duane remembered his uncles, however, who provided him with substitute masculine support. Mom was reliably there, as well.

First, I taught Duane relaxation techniques. Then, we talked over various areas of his life in more detail, and I offered him opportunities to vent frustration and process his stress differently. These forms of psychotherapy relieved about 75 percent of Duane's symptoms. However, the source for the remaining anxiety did not become clear until Duane had the following dream.

I was in a co-ed prison. I was on a work detail. I see my three-year-old-self guiding us to see my uncle, who is a retired minister. The three-year-old says, "Pay attention to your uncle. He has something important to say."

It is a rare dream that is this direct. How would you feel if a dream very clearly told you to pay attention to something? Would you pay attention like the peddler in the first chapter of this book, or would you be more like the innkeeper who brushed it aside? If you brush it aside, you will miss the buried treasure. As Duane's psychotherapist, I did not want him to miss the opportunity his soul had provided. We should never ignore guidance that we receive so clearly.

Dreams alert us to their importance in other ways, too. Recurrent dreams are the soul nagging at you. Another way a dream tells us to pay attention is when it conveys a feeling of numinosity, which is a sense of awe, fascination, or wonder that suggests the presence of God or some other form of transcendent reality. This was like Debbie's big dream in Chapter 2. We may have only a handful of such dreams in a lifetime. When they come, we need to take heed.

Now let us return to the "unspeakable" crime perpetrated on Tom, our fifteen-year-old in the hospital.

Reaching through to the Unspeakable

Hypnosis was a stepchild technique in my residency training, but I profited from a number of classes nonetheless. I read my books on technique to refresh myself the night prior to the first session with Tom. Then, armed with my renewed information, I entered Tom's room. I sat down at Tom's bedside and began the techniques for helping him relax and enter deeper into his interior mind. He was an excellent subject. Bolstered by that positive experience, Tom opened up to further exploration of his memories.

When I arrived the next day, Tom was more welcoming than he had been. Again, I helped him relax. Without my prompting him, Tom started speaking about an event that occurred after the trial of the man who had tried to rape him. At first, he recalled talking to a man outside the courtroom, who asked him what he thought about the trial. He did not want to discuss it and ran to his mother. Later, after arriving at the home of his uncle and aunt, his friends and family also asked about the trial. He again felt strongly that he did not want to tell them. He attempted to avoid these questions by walking to a store, but they questioned him again when he returned. He then recalled that he had been made to swear an oath before the judge in which he promised *not* to divulge his testimony to anyone outside of the courtroom. He understood this to mean that he should *never* tell anyone what he had testified regarding the attempted rape experience.

On the evening of the first seizure, he had recalled that prohibition and wondered if testifying had been worth having to endure the pressure and publicity. As he thought about it, he felt tension mounting inside, developed a headache, and then blacked out. Following these events,

no one troubled him with questions about the trial since all their attention was directed at the new seizure problem. This encouraged further use of his maladaptive symptom.

I realized that this wonderfully explained a great deal. Tom was caught in an unsolvable dilemma. He wanted to respond to his family and friends, but he feared violating the judge's admonition. It was a classic double-bind. We explained to Tom that the judge's prohibition against telling anyone applied only until the trial was over. He was now free to discuss the contents of his testimony all he wanted. Tom smiled a little and relaxed further.

Tom then began to relive the feelings he had had when he was being attacked. I saw his anxiety and distress rise; he wanted to forget the terrifying ordeal. I assured him that I believed he could tolerate the feelings without having to forget them. After this encouragement, he chose to remember and speak aloud the memories. It was not nearly as difficult as he expected.

Tom awoke from the trance refreshed and at ease. He refused follow-up visits, but we were able to call his mother ten months later. He was still seizure-free.

Pay Attention When the Soul Speaks

Truth can hide if it seems to provide safety. Tom's was a situation much like what Freud witnessed when he was formulating his ideas about the unconscious. Emotionally-caused symptom formation, formerly labeled "hysteria," was common in his day. It stemmed from the Victorian style of repression, which made sexual topics unmentionable and family dysfunction or other trauma a source of silent shame. Similar to the Victorians, my young patient considered his trauma not discussable, and it had occurred in the realm of his sexuality. He experienced a threat to his sense of masculine sexual identity at the time of its first nascence. He felt vulnerable and unsure of himself. With those traumas and those repressions, he had few ways to express his pent-up, helpless feelings other than to black out.

In his case, hypnosis gave him permission to breach his secrecy agreement with the judge. It also gave him a safe way to release some of the fear and helpless feelings through healthy discussion, rather than through silence and seizing. Tom felt much better after our single session. He was ready to return home and no longer had to suffer the unconscious mind's habit of grabbing him by the body and shaking him so he would pay attention.

It is generally a good idea to pay attention when the unconscious mind speaks.

The Ego and the Unconscious

In our era, Freud raised modern consciousness to accept the fact that much of our inner working is unconscious to us. The conscious part of the mind, Freud termed *ego*. The remainder he called *the unconscious*. This is the simplest of the soul divisions.

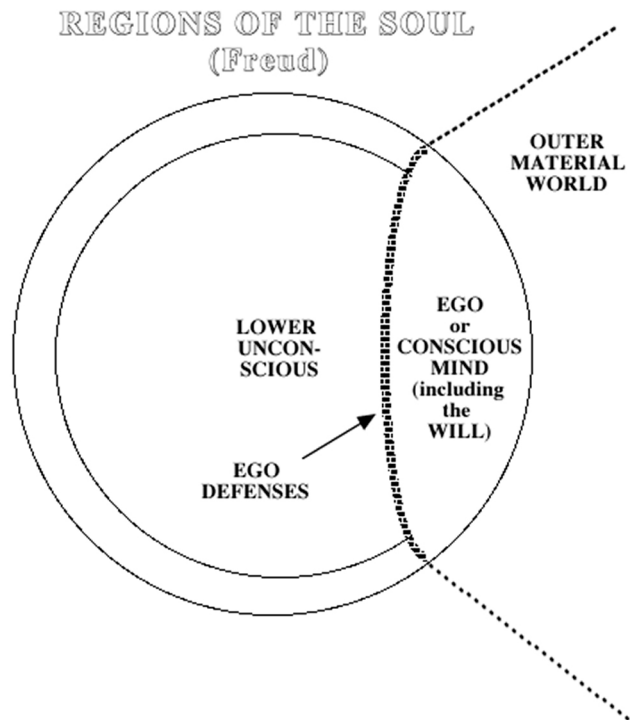
Using discussion with the aid of deep relaxation/hypnosis, my patient and I recalled all of the details of the trauma, speaking them aloud and bringing forth the feelings in a safe environment. Because we worked through the trauma shortly after it happened, we were able to achieve complete remission of his symptoms and his potential for longer-term problems. By the time I first spoke to him, the details of the memories and all of their emotions had already partially hidden. The link-up of the trauma and the symptom of seizures hid completely outside of Tom's awareness. As Freud would say, it had been repressed into the unconscious.

Long-term shuttling of trauma feelings and details of memory into the unconscious part of the mind distorts the personality. The distorting effect can take various forms— certainly not only seizures. Eventually Tom's psychologically generated seizures might have dissipated without intervention. However, they would have left in their place what is known as either a *neurosis* or a *personality disorder*.

Neurosis: The person whose response to threat is dominated primarily by fear and withdrawal would limit their life unnecessarily and suffer various types of psychological or even genuine physical symptoms from the repressed stress. Had Tom become somewhat of a psychological cripple from ongoing seizures or anxiety, this would be called *neurosis*.

Personality Disorder: The person whose dominant unconscious response to threat is aggressive rather than withdrawing might develop a sense of being gypped by the world and entitled to strike out in order to obtain recompense. Tom, for example, might have transferred the feelings originally intended for the accosting men to other situations to which they did not apply. He would have undergone a negative personality change instead of developing various bodily symptoms. This is the *personality disorder* solution. Of course, it is not a solution at all; it just causes a different set of problems.

What we see in the example is that there was an ego—the conscious experience of the young boy—and an unconscious—the region of soul in which resided the details of memory and unexpressed emotions. (See Figure). The emotions influenced the ego, although the ego was unaware of their influence and simply believed that he had seizures for neurological reasons. A force or barrier of repression kept the contents of the unconscious from entering the conscious ego space. This barrier is termed *ego defenses*. Thus, in the illustration above, we have a model of the soul.



The Missing Region

As time went on and personality understandings grew, other theorists and researchers began to appreciate that there was more to a mind than Freud envisioned. Though Freud added a good deal of detail to his model of the unconscious, he continued to see the unconscious strictly as a repository of structures and energies lesser than, and more troubled than, the ego. The ultimate goal of human development, therefore, was to shift the energies and personality forces from under the dominion of unconscious and over to the conscious ego's domain. The ego would thus become “king of the soul,” and a strong and skillful ego was the most an individual could expect to attain through their development and suffering.

A student of Freud eventually broke ranks with him when he realized that important components of soul existed that Freud would not acknowledge. This was Carl Jung. Jung made many important contributions to psychological theory, but a chief one was the realization that there were forces and structures discernable within the soul that were not only lower than the ego, but higher, as well. In this context, the term *higher* means that parts of the soul perceive the

direction the soul is headed in its development and know what the soul needs more clearly than does the ego. This higher principal is perceptible in several ways, but special symbols often arise that carry numinous fascination and hint at something more to life than the egocentric preoccupations of the moment. Jung called these *symbols of transformation* or *symbols of transcendence*. To illustrate, let us return to Duane.

Symbols of Transformation: Duane's Dream

We left Duane having just been told by his inner, younger self, "Pay attention to your uncle. He has something important to say." Duane felt very intrigued by the urging of his dream, so we used *active imagination* to continue the dream.

Active imagination is a technique introduced by Jung. In it, the conscious ego enters into dialog or imagery interaction with the contents of the unconscious. These are usually dream figures, but not necessarily. Jung also realized that any feeling could be turned into an image merely by asking the inner self to do so. Once an image associated with a feeling was developed in the imagination, interaction could then occur with it, as well; that is, we could speak with the emotion itself.

I helped Duane relax a bit; then I suggested he could go back to the last scene of his dream. The imagery and dialog developed as follows:

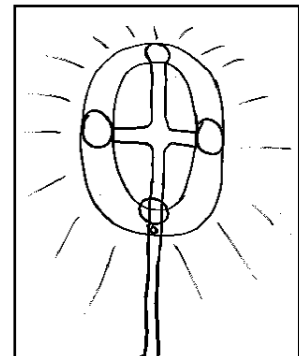
My uncle has a Bible in his hand. He starts off at a younger age and then rapidly changes to his present age. He opens his Bible, and I go through various age changes as he reads the Bible. As I get to age forty (Duane's current age at the time), I start listening to what he has to say. He points out something interesting. The three-year-old is outside the bars of my cell, looking in. He slips between the bars and pushes my uncle and me apart. He says, "No! I don't want you to learn that. You'll be hurt. Can't you remember how you were hurt the last time? You believed, and your father left. Don't give anything to God. He took something away." The three-year-old is angry and violent.

Duane elaborated tearfully, "I lost something I loved very much. I don't know who to hold responsible except for God. It's like the three-year-old is saying, 'I'll never forgive.'"

Following this revelation, Duane and I worked to alleviate the longstanding hurt and anger, dormant since his father's death. Thereafter, Duane had several dreams about beautiful, but expensive, antique telegraph keys. Collecting such keys was a hobby at which he was quite accomplished. The dream sequence climaxed in the following manner.

I was in Antique Row. In one *familiar* store, there were no telegraph keys. I went to a *new* antique shop. They had lots of pieces. I was looking at one when a friend from college walked up and handed me two miniature keys—one a hundred years old and highly desirable, worth \$1000. I put it down.

As Duane pondered the dream, the high cost of the keys reminded him of the adage, "If you want to dance you have to pay the piper." He related the dream to a struggle between his old *familiar* worldview and something *new* that was trying to emerge. There would be a cost whether he decided for the old or the new, but he felt he was



“in the dance” and had to decide something. I asked him to draw the most impressive of the telegraph keys, which is reproduced here.

Duane noticed the cruciform shape of the image and referred to the overall image as a Celtic cross. Symbols that fascinate us and radiate light, like this key, are known as *symbols of transcendence*. These arise to indicate activity of the highest and wisest parts of the soul. They focus the attention of conflicting parts of the psyche on the possibility of a more unified state of mind at a higher level of maturity. Subjectively, they inspire a sense of higher calling or greater wisdom.

Duane’s associations to the long arm of the cross were that it represented “the long path from *here* to *there* in life.” The place referred to as “there” was enclosed by the oval and recognized as a *mandala* figure. A *mandala* is a symmetrical geometric figure, sometimes elaborate, sometimes simple, which represents psychological wholeness, the highest spirit of man, or the transcendent Godhead. The circle is the simplest of these figures; the “Rose Window” of Notre Dame Cathedral is perhaps the most famous.

Duane was impressed by this symbol and began spontaneously asking for readings in Christianity. He found C.S. Lewis much to his liking. A month and a half later, he overcame his final intellectual hurdle to faith after exploring the following dream.

I was visiting a ham radio operator friend. He wanted me to climb his tower to work on his antenna. I replied, “I don’t climb towers, Phil. I have acrophobia.” He encouraged me to try, so I did, with apprehension. At the top of the tower, I stepped off of the ladder and hovered above the ground.

This hovering led him to discuss the possibility of supernatural intrusions into the natural world. He realized that his current belief in a cosmos working solely according to known natural law was an unexamined assumption. By the next session, he had read C.S. Lewis’ *Miracles*. Finally, after accepting the possibility of a reality above known natural law, his remaining anxiety dropped from 25 percent to 15 percent. Duane’s making of peace with God was climaxed quietly in the following dream.

My granddad had a terminal illness. The doctors rolled him in on a table. They said, “We can keep him alive for another few hours if you want.” I didn’t want him hooked up to the tubes. I wanted the death to be natural.

Duane spoke of having to die before being reborn and saw the dream as representing his letting go and turning his life over to God. In his words, he had “received the gift.” Thereafter, his lingering anxiety diminished to 5 percent or less. Five sessions later, he was ready to end treatment. Follow up for the next several years showed continued freedom from anxiety, as well as growth in his new faith.

So, we see that Duane *did* have a bug in his program, and it was keeping him from God. I emphasize that I did not initiate any suggestion of movement in a spiritual direction throughout this time. Spiritual issues were forthrightly discussed when he brought them up, but all movement toward this resolution arose from within his own soul, primarily through the medium of dreams.

From Whence Comes the Dream?

In order to account for this kind of human experience, one must affirm that there is the existence of not only a lower unconscious, but a *higher* one as well. The lower unconscious was

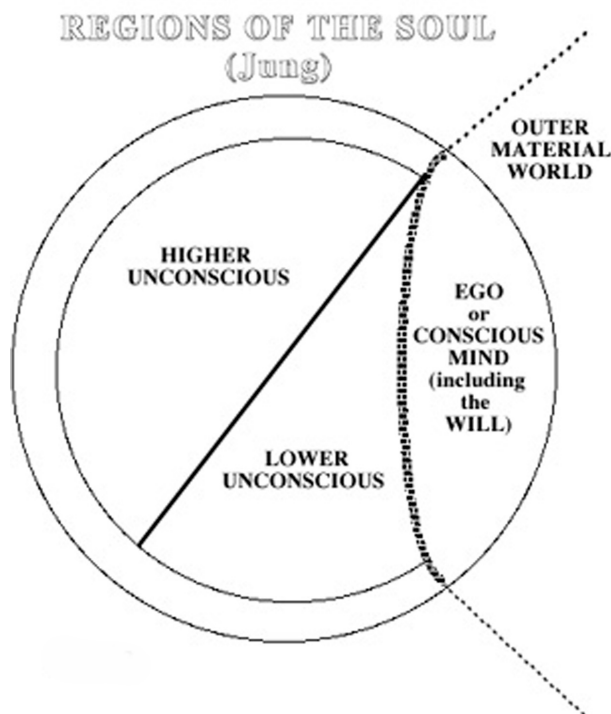
the region where Duane's inner child resided—troubled and hidden, yet influential. The higher unconscious was the part of the soul notifying Duane through dreams of his inner child's need to progress him through a healing process. It further provided Duane the numinous symbol of the telegraph key, which became for him a symbol of transformation and transcendence. The model of the soul thus begins to take on a form like the figure to the left.

In this diagram, the *higher unconscious* is drawn in a location more distant from the *ego*, because the experience of the higher unconscious feels deeper and more profound than does the more troubled, and more surface, *lower unconscious*. The higher realms of soul are therefore subjectively not only higher, but also deeper. What is more, the lower unconscious acts to obscure higher things, as it did with Duane, until we deal with the issue blocking us and resolve it.

A Unique, Bird's Eye View of the Psyche

Few are as privileged as psychotherapists who get to experience the reality of the inner soul up close, in detail. Certain individuals who come to therapists are gifted with an inner sight that allows them to experience vivid inner images of their own psychological world. As a rule, these souls have strong natural abilities to experience inward absorption into fantasy. Often, they had traumas in early childhood, before age seven, that predisposed them to utilize this fantasy absorption as a means of escaping their tumultuous or troubled surroundings. The escape to fantasy saved them in many ways, but it also left numerous traumatic memories and feelings unresolved. For that reason, they make their way to psychological professionals.

One such individual detailed her inner life in Dr. Ralph Allison's book, *Minds in Many Pieces*. (Allison M.D. 1980, 141-144) Her description is vivid and compelling, and it enables us to achieve a more complete appreciation for what these regions are like. This particular woman suffered Dissociative Identity Disorder, a syndrome that was previously called Multiple Personality Disorder.



In *Minds in Many Pieces*, Sylvia is the name given to a personality who sees and knows a bird's eye view of the psyche. She describes to Dr. Allison the imagery that each soul region takes. Below is a summary of her descriptions.

The middle unconscious or waiting room.

The middle unconscious is located just behind the ego and the outside world. Sylvia sees here muted colors, like splotches on a wall. They are of various sizes. In her mind, alter personalities can wait here and observe the outside world more closely, as well as pop out quickly if their issues are triggered.

In most of us, the equivalent to this area would be what Dr. Roberto Assagioli called *the middle unconscious*. (Assagioli 1971) When we turn our thoughts gently inward, our first awareness is a place of

random thoughts that usually are barely perceived. If we decide to, we can willfully grab one of those thoughts to focus on it. Otherwise, the thoughts just come and go, usually containing reactions to our day, concerns, or things we may need to remember. Those who practice meditation have called this area *the monkey mind*. It is a region we must get beyond if we are to enter a meaningful meditative state. These distracting thoughts vie for our attention. Meditation and contemplative instruction teach us to let each of these distracting thoughts go in favor of a focus on a scripture, a key word, or some image used as a sacred focus of attention. This region is not yet depicted on our diagram.

The higher unconscious

Sylvia saw the higher unconscious area as higher than the waiting room. When Sylvia moved higher into her head, colors became lighter and more pure. This was her place of meditation. In this place, she felt safe and secure. Upon returning to outward consciousness after time spent here, she generally experienced a mildly euphoric sense of well-being. Sylvia referred to this location as her “heaven.” The colors were mostly blue and yellow with a little red. She also noted that Charity exists there. Charity, in Allison’s psychological system, was what she called “an inner-self helper.” Charity was a personified voice of sanity or wisdom who always had helpful input for the more outer personalities whenever they were quiet enough to listen. She was, within Sylvia, a “still small voice.” The name *Charity* is the King James translation of the Greek word *agape*. This is the highest form of love.

While describing the imagery of Charity, Sylvia noted a difference in symbolism between entities from the higher unconscious and personality fragments in the lower unconscious. Entities from the higher unconscious “are more like very dense clouds, bright and very active, hovering over us, but apart from the rest of us.” They could take human form or could manifest more like “energy,” as shining balls of light that move intelligently or radiate a sense of goodness or wisdom. She noted that these forces of the higher unconscious do not control the ego and personalities of the lower unconscious. They respect the lower personality and ego’s freedom of choice. Instead, they are simply guides who see things from an overarching perspective. Only in emergencies will they actually intervene with any forcefulness.

Charity, as the inner-self helper, is a resident of the higher unconscious at a lower level. As Sylvia points out, there are other realities higher even than Charity:

When any of us travels higher into our head, the colors become lighter and more pure. This is where “heaven” is. The colors are mainly blue and yellow with a little red. This is also where the others above Charity exist.

We will learn more about these higher things as we proceed. For now, just realize that your soul is structured to contain your own private heavens and your own private hells. This does not eliminate the more spiritual higher and lower realms. As it is in outer spiritual realms, so it is in inner soul realms. This is an example of the metaphysical notion of “macrocosm equals microcosm.”

We all have a region like this. It is the higher unconscious. Learning to experience this more readily and regularly is quite important for mystical growth and discipleship. We will look at this further in future chapters.

The lower unconscious

Sylvia described:

In the back of our head, the colors are dark orange, blending into brown and black. There are huge shapes of things suspended in midair. They look like large, sharp, jagged rocks. If someone wanted to hide, that would be the place to do it. When I go there, I feel very creepy, as if things were staring at me that I really can't see. I feel very cramped and stuffy there.

This place is close to what Sylvia described as her personal hell. The deepest location in the lower unconscious is below the bad thoughts, memories, and repressed feelings like hate, anger, shame, and fear. Hideous monster symbols occupy this hell. It is a place no one wants to go. The monsters are black and very large. In their presence, her body felt very heavy and as if it were covered with thorns and thistles.

Meeting My Lower Unconscious

Although individuals differ somewhat in the way they describe their inner experience, much in Sylvia's description is universal. First of all, notice that the speaker was *not* the primary personality, Sylvia. The speaker was an inner personality state. Most souls are not so dissociated as to have alter-personalities who can take over the body completely at times. However, many of us have what are called *ego states*. These are typically mood states or other atypical states of mind that can overtake our conscious intentions at times. Typically, they are triggered by some pet peeve or hurt, a troubling turn of phrase, or a behavior of someone in our environment. We feel a sudden sorrow or anger that is hard to shake off. In a sense, we are "taken over" for a time, as an alter personality can take over a person with Dissociative Identity Disorder. Sometimes, after an experience like this, a dream will show us the fuller nature of this unexpected side of our personality.

Many years ago, I remember a day when my wife and I were playing tennis. I was frustrated and falling behind in the match, so I redoubled my efforts to attend to the details of my game. Gradually, I began to gain on her until, finally, I achieved match point. She hit a short shot near the net that was an easy put-away. Rather than doing so simply and winning graciously, I entered an ego state of sadistic glee at my come-from-behind victory. I ran to the net and slammed the final shot exclaiming like a pirate ensnaring his victim, "Aha! I gotcha!"

It was not my conscious intention to hurt my wife's feelings; rather, it was to express my relief and satisfaction at victory. I was not aware of how harshly I was coming across. Yet the sadistic element of my mood had its adverse effect. That night I dreamt that I was relating to a Central American death squad leader. My wife immediately knew who he was. It took me a bit longer to realize that it was he who had overtaken my ego the day before on the tennis court. I have been much more consciously careful in competitive situations ever after, knowing that the potentiality of a death squad leader existed within me. In fact, the mere consciousness of him has essentially been a cure. As Jesus said, "Know the truth and the truth will set you free." (John 8:32)

Conclusion

We have seen the action of the lower unconscious in fifteen-year-old Tom's "psychogenic" seizures. We have seen the higher unconscious leading Duane through a series of dreams to abandon his reductionist view of the world and replace it with a model that is open to transcendence. Finally, we have marveled at the clarity with which Sylvia described her inner regions of soul, both higher and lower.

I have barely skirted some of these psychological realities, so far. So that I may develop these more vividly in your imagination, I look forward to relating the story of Andrea. Perhaps you will be as blessed as I was to get to know her.

