

An Interview with Army Mindell on Extreme States

THE JOURNAL: Could you talk about the history of Process Work and the basic approach that you take with extreme states?

ARNY: I was always fascinated with extreme states because I grew up in a time which was in the midst of one, namely the second world war. Most of the kids in my kindergarten in 1945 were angry, furious, wild, racist, sexist, anti-Semitic and belligerent. World War II had just ended, but battles continued in my home town in the United States. I often felt that people around me were fighting for life—yet there was no outer oppressor! Were they insane? As a child, I often asked myself, is the whole world crazy about war, or am I weird? My answer is no, the world is not crazy. We were carrying on battles which the international peace treaties never addressed.

Later, when I studied psychology in Zürich, the questions about who was crazy came back during my classes on psychopathology. I felt amazed that so many of the “patients,” who just seemed wild and awesome to me, were understood as outside the context of the world we live in. I wondered, why could only people in white coats work with them? Who was crazy?

In any case, after I finished my studies, I went through a phase in my learning where I saw a lot of people with physical illnesses and those in near death situations. After I found my path in body work with symptoms, I continued through another phase of learning and accepted all clients with “strange” mental states. In the middle of this study and practice, I met Dr. Dieter Wartenweiler, the head of Social Services in Uster, Switzerland. He and I made a wager. I bet that the most difficult cases his agency cared for could be helped without medication. This led me to investigate the theory and practice of working with

people in deep altered states. I also felt encouraged to go deeper with near death situations and comatose states. This work led to the publication of *City Shadows: Psychological Interventions in Psychiatry* (1988).

A basic process work approach to extreme states is non-dualistic. Process Work approaches extreme states like any other situation or state of consciousness, that is, with an open mind. Follow yourself, follow the other, watch the signals of the world, try to track what happens and make the best out of it. This basic Taoist attitude is easier to say than to do, because extreme states in yourself or others confront you with the limits of what you have been taught is “healthy, good and right.”

THE JOURNAL: Psychotherapy historically has held some prejudice against altered states, i.e., valuing certain states as normal and others as pathological. What do you think about the relationship of psychotherapy to altered states?

ARNY: Psychotherapy, without quite realizing it, mirrors collective social, Eurocentric ideals. The “integrated person” works for a living, cares for herself, is more or less independent and not too loud. While this behavior makes life easier in a western country, it should not be assumed that this is normal. Any psychotherapy which mirrors collective ideals, but ignores and pathologizes altered states, runs the risk of being racist and sexist. If “health” means “acting like the majority,” then being “unhealthy” means that all minorities are in danger of being pathologized by the mainstream in any country.

Pathologizing grows out of the mainstream judging instead of observing and wondering about certain states. We find it easier to talk about observing and wondering than to do it, because we have at the same time to quiet our inner social

police who want to keep anyone who cannot or will not adapt to the mainstream in jail or in a hospital. Even worse, our inner social judges make us think we are strange for even wanting to do research into such states.

The deepest and most meaningful changes in individuals, relationships and groups happen through the emergence of altered states. Anyone interested in change and process, transformation and development, cannot avoid strongly altered states. These include hallucinations, paranoia, megalomania and wildness, ecstasy and spiritual experience as well as sloppiness, depression, addictions or just wanting to “drop out.”

Today, transpersonal and human psychologists like the Grofs and others are ameliorating the tendency to pathologize extreme states by including spiritual experiences as part of their work with extreme states. However, even this approach holds the basic attitude that there is “spiritual emergence” which must be differentiated from psychosis. So the dichotomy between well and ill still remains.

THE JOURNAL: We understand that the idea of primary and secondary processes¹ developed out of your work with extreme states. How did this happen? Are there other ways in which your work with extreme states has contributed to the development of Process Work?

ARNY: Consciousness and unconsciousness, ego and subconscious are non-relativistic terms based upon the assumption that a standard reality exists. These ideas are based upon a value judgement relative to an unmoving system called everyday reality. Altered states are to “normal mental health” as relativity is to Newtonian physics. These states show that the governing paradigm is non-relativistic. Parapsychological events, visions, UFOs and near death phenomena must fit into our world view if we are to accept our natures.

Inward oriented people who will not talk, who hallucinate, want to kill themselves etc., do not follow collective paradigms. We need a theory and practice which is not based upon health and illness, normal and abnormal, ego and unconscious, but which is based upon the way an individual identifies herself.

Primary and secondary process thinking relativizes the way people feel about and understand themselves. These process structures are not pathological, but are based upon individual experience. Moreover, these structures fit people from

all cultures. There is no *a priori* differentiation between women and men, ethnic groups or ages, since the nature of the processes is structured by individuals. The idea of a primary and secondary process also fits couples, families and large groups, who have identities and secondary processes, all of which are steadily in the midst of change.

THE JOURNAL: What do you think about traditional psychodiagnostics? Given that Process Work does not pathologize extreme states, if you look into the future development of psychiatry, what do you imagine?

ARNY: There will always be something like psychiatry, because the majority will always take an interest in diagnosing out people it wishes to marginalize. At the same time, there will always be another stream in psychiatry and psychology, which is person, or rather experience and process centered. This stream is interested in both the individual person and the group.

I can also imagine a change in our culture in the distant future which will melt medicine, psychiatry, psychology and social work into one. Many helpers are already doing this in their practices.

THE JOURNAL: What about people who are a danger to themselves or others? How does Process Work deal with these people?

ARNY: The question “How to do this or that” must always be answered with, “every case is individual. Follow the individual. Follow the Tao.” The Tao of the United States, for example, includes malpractice problems, so we also need to come up with temporary answers to the question, “What about people who might kill themselves and others?”

People who are dangerous to themselves and others bring up deep ethical problems and processes in the therapist. For example, I stand against people hurting themselves. I tell them I will fight them and that I do not want to see them hurt. Some get angry and tell me I am not open. I listen to them. I try to listen to nature’s voice in all this. There are rare times when she too says, “Sorry, this client is mine and not yours, take your hands off and let fate do what it must.” We humans are co-creators, not creators. Life and death are not our business alone, even though we can fight for those we love. Before giving in to nature, I must try everything, and know that others who are better qualified have been consulted and that they too have reached the end of their abilities.

THE JOURNAL: What is the role of psychotropic drugs in Process Work?

ARNY: There is no one "role," for this too is individual. On the one hand, everything is psychotropic: coffee, sugar, bread, alcohol, smoking. I am less interested in psychotropic drugs than in why I myself tend to experiment with foods, drinks and chemistry.² My own desires show me who I am; they inform me about the altered states I need. If I get addicted to something, this tells me I do not allow the altered state connected with the addiction to influence my life. So, in a way, psychotropic drugs open us up to parts which have been closed. All drugs open us up to aspects of our nature we struggle with. But the open door is not the passage through into the other room. It is up to us to take the opportunity to pass through the open door, or not.

THE JOURNAL: You developed the city shadow concept, i.e., that people in extreme states are relevant for the society in which they live. What do you think those of us who identify as so-called "normal" people should do about extreme states? What is our responsibility?

ARNY: Worldwork. Our responsibility in reducing the agony tied up with altered states is to involve ourselves in social change. Every process work session, even opening up to something new or wild or ecstatic in yourself, is worldwork.

You must help the client to know the personal, familial and social issues behind her edges. If she now feels freer because of her work, she too must involve herself in freeing others in her society whom she, because of her nature, may have been holding down.

THE JOURNAL: Your book, *City Shadows*, written in 1988, addressed Process Work with extreme states in detail. What are your current ideas about Process Work with extreme states?

ARNY: My current idea is that I should learn more about what I wrote then. I was at least twenty years ahead of myself.

THE JOURNAL: In September of 1993, you, George Mecouch and Joe Goodbread conducted a week-long clinic on extreme states. What was your greatest learning from this experience?

ARNY: It always amazes me to see how meaningful extreme state experiences are. I also learned that extreme states work can be done in front of others, taught, discussed and learned!

THE JOURNAL: Why do you use the term extreme state rather than psychosis?

ARNY: Psychosis is a term based upon the paradigm of pathology. Extreme state on the other hand is relativistic; it is neither good nor bad but simply says that someone's experience is unusual relative to her world.

THE JOURNAL: Do you experience extreme states? How do you deal with them?

ARNY: I go through wild states when I write. I go into a state of intense concentration and focus two to four weeks at a time. I always think this will injure my health, but it never seems to bother me. I don't deal with my extreme states, I get into them and try to find their purpose.

Every time I see someone using their rank consciously or unconsciously to ignore, marginalize or hinder someone else from flowering, I become extreme! I am furious about sexism and racism, they depress me deeply. I am utterly and hopelessly identified with the world. If anyone lords over someone else, I am hurt. It kills me. Only after having been extreme in some form or another can I open up and listen to and even love others.

THE JOURNAL: Extreme states are a part of most people's lives, but we tend to try to control or repress them. In your imagination, what would the world be like if we lived them more?

ARNY: Society too has its primary process. So there will never be a world as far as I can see which just lets extreme states rule the show. But the world would be a better place if we had more carnival time, where madness had its way. I love carnival, Fastnacht,³ Mardi Gras! On the other hand, I find nothing more beautiful than normal, everyday reality after being far out for a long time.

THE JOURNAL: There is a theory that people with schizophrenia don't get as much cancer as the rest of the population. What do you think about this?

ARNY: Madness and cancer are both forms of the shaman's ally. Both are wicked powers which require warriors to fathom and bring these powers to earth. People who suffer from either cancer or attacks of wild fantasy are not only sick in the conventional sense. In my mind, they are channels for energies the rest of us fear.

THE JOURNAL: At various times you have commented on the connection between relationship difficulties and extreme states. Could you say something about that?

ARNY: We fall madly in love, hate, despair, get paranoid. The other person is everything or nothing, god or the devil. Relationships cause many of

us to live in permanent extreme states! Relationships are for warriors who know that their states are there for a good reason. They vow to process relationship states instead of repressing them, sinking into them or disappearing.

THE JOURNAL: If we all lived our extreme states, could culture in any coherent form exist? Or do we need to repress ourselves to have a society with structure?

ARNY: What a great question. I would hate to live anything all the time—even my most ecstatic states. I prefer to wander, as my process wanders, through “mad” periods, and then through “normal” social states as well. The year has seasons, and I love them all.

Notes

1. Primary process refers to aspects of a person with which she or he identifies. In contrast, secondary process refers to aspects with which a person does not identify.
2. See “Being Prozac” by Janiese Loeken on page 35.
3. Fastnacht is the name for Carnival in Switzerland.

Arny Mindell, Ph.D., the founder of Process Work, is the author of numerous books and a teacher at the Process Work Center of Portland and throughout the world. Along with his wife Amy, he teaches and learns about Process Work as it applies not only to psychotherapy but to world and social issues including racism, conflict resolution, extreme states, coma and dying.