

Holotropic Practice and the Promise of Full-Spectrum Transformation

La Práctica Holotrópica y la Promesa de una Transformación de Espectro-Completo

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Abstract

Philosopher Ken Wilber has called for a “full spectrum” approach to personal transformation, one that would embrace all levels of consciousness (e.g. body, mind, soul, spirit). This article considers how holotropic practice, devised by Dr. Stanislav and Christina Grof, could fulfil this vision. Although Wilber calls for a variety of practices to be used, one for each level of the spectrum of consciousness, this article shows how holotropic practice could provide a full-spectrum approach in a more efficient way, specifically by: a) diagnosing the most important psycho-spiritual issue to be worked on at the time, b) providing a targeted form of healing or development for that issue; c) offering a prescription or referral for additional help on that issue. Furthermore, this article shows how holotropic practice could help seekers discover levels of the spectrum that were not known to them, and even allow seekers to experience many levels of the spectrum simultaneously, giving them personal experience of and insight into the multi-dimensional nature of being.

Keywords: Ken Wilber, Stanislav Grof, Christina Grof, Holotropic Breathwork, spectrum of consciousness

Resumen

El filósofo Ken Wilber ha propuesto un enfoque de "espectro completo" en el proceso de transformación personal que abarque todos los niveles de conciencia (por ejemplo, cuerpo, mente, alma, espíritu). Este artículo considera cómo la práctica holotrópica, desarrollada por el Dr. Stanislav y Christina Grof, podría cumplir esta visión. Aunque Wilber plantea que se deben utilizar simultáneamente una variedad de prácticas, una para cada nivel del espectro de la conciencia, este artículo muestra cómo la práctica holotrópica podría proporcionar un enfoque de espectro completo de manera más eficiente, en particular: a) proporcionando un diagnóstico del tema psicoespiritual más relevante que ha de ser trabajado en un momento determinado, b) proporcionando una forma específica de curación y/o desarrollo de ese tema; c) ofreciendo una prescripción o referencia para buscar ayuda adicional en relación a ese tema. Además, este artículo muestra cómo la práctica holotrópica podría ayudar a los buscadores a descubrir niveles del espectro de conciencia que no conocían previamente, e incluso permitirles experimentar muchos niveles del espectro simultáneamente, proporcionándoles una experiencia personal y una comprensión de la naturaleza multidimensional del ser.

Palabras clave: Ken Wilber, Stanislav Grof, Cristina Grof, Respiración Holotrópica, espectro de la conciencia

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Introduction

Since the 1960s, the West has seen a flowering of interest in new forms of therapy and spiritual practice, as well as the unprecedented availability of traditional Eastern spiritual traditions. With so much availability and such diversity, Western seekers¹ face a veritable “supermarket” of transformational practices.

But with so many practices available, how do seekers find the right practice when they need it? It’s not clear that an individual who is seeking help—often in a state of distress—is an informed consumer. And many seekers have spent years—and a lot of money—in some form of therapy or spiritual practice that may not have been well tailored to their needs.

Finding the appropriate practice is made even more difficult because various schools of psychotherapy, healing, and spiritual practice differ about technique, goals, and even the nature of reality itself, and these differences may not be at all clear to the seeker at the outset².

This article considers the unique value that holotropic practice, developed by Dr. Stanislav and Christina Grof, could play in helping seekers find their way efficiently in this supermarket of transformation. This article will first show how holotropic practice fulfills the challenge set out by philosopher Ken Wilber: that a comprehensive process of transformation should address all levels of the spectrum of consciousness. It will also suggest how the holotropic approach can aid in the efficient diagnosis and healing of psychological and spiritual problems, as well as help individuals find the most appropriate form of practice for their needs.

Finally, the article will identify several ways in which holotropic practice fails to provide full-spectrum approach.

The spectrum of consciousness

One of the key challenges to seekers presented by the availability of diverse therapeutic and spiritual practices is that there can be major differences in method, values, goals and even beliefs from one practice to another.

Philosopher Ken Wilber has developed a theory that gives coherence to the problem of these different claims about consciousness. Marshaling considerable evidence, he suggests that consciousness is arranged as a spectrum, broadly encompassing matter, life, mind, soul, and spirit³ (Wilber, 1977, 1995).

Typically, each of these levels is the concern of a different branch of knowledge or developmental practice. For example: physicists focus on matter; biologists focus on life (with physicians focusing on the

organic causes of illness); psychologists focus on mind; shamans focus on soul, and mystics focus on spirit. Unfortunately, one discipline may ignore, downplay, or disparage the truth claims of other disciplines.

According to Wilber, a truly holistic or integral path would encompass all levels of the spectrum, acknowledging that humans are composed of all of these dimensions, at least in potential⁴ (Wilber, 1995).

Wilber thus suggests a “plan” for therapy or self-exploration that would address each level:

Take a practice (or practices) from each of those levels, and engage whole-heartedly in all of those practices. For the physical level, you might include physical yoga, weight lifting, vitamins, nutrition, jogging, etc. For the emotional/body level, you might try tantric sexuality, therapy that helps you contact the feeling side of your being, bioenergetics, etc. For the mental level, cognitive therapy, narrative therapy, talking therapy, psychodynamic therapy, etc. For the soul level, contemplative meditation, deity yoga, subtle contemplation, centering prayer, and so on. And for the spirit level, the more non-dual practices, such as Zen, Dzogchen, Advaita Vedanta, Kashmir Shaivism, formless Christian mysticism, and so on.

I hesitate to give that list, because, as you know, there are literally thousands of wonderful practices for all of those levels, and I shudder at excluding any of them. But please just focus on the general idea: take one or more practices from each of the levels of your own being — matter to body to mind to soul to spirit — and exercise all of them to the best of your ability, individually and collectively (Wilber, 1999: 198).

This spectrum idea, Wilber suggests, can also be used by physicians and therapists to diagnose patients—to ascertain where on the spectrum the patient’s illness originates, and then create an appropriate treatment plan. (Wilber, Engler and Brown, 1986) How a physician or therapist should make that determination is not clear in Wilber’s work.

Wilber’s suggestion, however, even if considered ideal, may strike many as impossible to implement. Imagine coming home from a difficult day at work after a long commute, then doing the chores and spending quality-time with the kids, and then beginning a full-spectrum regimen of jogging, Tai Chi, psychotherapy, chanting, and meditation. It is interesting in theory, but hard to imagine in practice.

This article proposes that the work of two other

transpersonal theorists, Stanislav and Christina Grof, may provide a more efficient and practical solution. Specifically, the practice they devised, known as “holotropic,” may: a) provide a way to diagnose or determine the most important issue for each seeker (or find the level of the spectrum at which a seeker’s work will be most efficient, b) offer each seeker the optimal mode of healing for this issue, and then c) provide each seeker with a perfectly customized prescription for additional practice.

Holotropic Practice

Dr. Stanislav Grof, a Czech psychiatrist, was an early researcher into the clinical use of LSD and a key figure, with Abraham Maslow and Anthony Sutich, in the foundation of the discipline of “transpersonal psychology” (Vich, 1988). He was one of the pioneers of clinical consciousness research, and has been cited by Wilber as “arguably the world’s greatest living psychologist” (Wilber, 1997b).

Grof’s theories were developed initially through his study of the clinical use of the psychoactive drug, LSD. His conclusion was that LSD, when administered in an appropriate set and setting, induces a “non-ordinary state of consciousness” that has inherent healing and transformational value. In this context, LSD is simply the catalyst, or a “non-specific psychic amplifier,” for a transformational experience (Grof, 1980).

With Christina Grof, he then developed a technique called Holotropic Breathwork, in which seekers also gain access to similar states of consciousness, but in which the catalyst is not LSD but deep, fast breathing.

Stanislav Grof also coined the term, “holotropic,” to describe not just their technique but also certain states of consciousness. According to the Grofs, “this composite word means ‘oriented toward wholeness’ or ‘moving toward wholeness’ (from the Greek *holos* = whole and *trepein* = moving toward or in the direction of something) (Grof and Grof, 2010).

The Grofs have used this term to describe a large subset of non-ordinary states of consciousness that move us toward wholeness, no matter what practice occasioned these states. For the purposes of this article, however, it is important to consider only those holotropic states that are occasioned by the set and setting specifically formulated by the Grofs. It is also necessary to use just one term to refer both to Stanislav Grof’s LSD-assisted practices and the Grofs’ Holotropic Breathwork (HB), as this article addresses what is common to both.

This article therefore uses the term “holotropic

practice” to refer to both HB and Stanislav Grof’s original LSD research. This article also uses the shorthand, “holotropic session,” to refer to any session following these requirements, “holotropic state” to refer to any state of consciousness induced by these methods, and “holotropic approach” or “holotropic practice” to refer to the practice in general.

The set and setting that the Grofs developed is quite specific. Seekers lie on a mattress, keep their eyes closed, and have a person nearby (a “sitter”) to keep them physically safe. Whether using deep breathing or LSD, the seeker is advised to have no agenda for the session—simply to trust that their “inner healer” will bring into consciousness the experience that is needed. Supportive and sometimes evocative music is played. The facilitator’s role is not to direct or interpret the process but to support whatever is emerging. During the session, seekers are free to move their bodies or to cry, scream, sing, chant, shout, spit up, meditate, etc.—whatever the inner experience demands. The facilitators are available to provide focused energy release work, if requested by the seeker, but this work is always guided by the seeker. Interestingly, there is no definite time limit for the sessions; facilitators make an implied commitment to stay with each person until she achieves reasonable closure from the non-ordinary experience (Grof and Grof, 2010).

According to Grof and Grof, in a holotropic session, clients can remember, discover, explore and abreact a wide variety of experiences. In Stanislav Grof’s cartography of the psyche, these experiences fall into four categories (Grof, 1988): 1) *sensory* (relatively insignificant physical, visual, acoustic phenomena), 2) *biographical* (primarily unfinished post-natal trauma, including the psychological effect of physical traumas, such as accidents and medical interventions), 3) *perinatal* (relating to biological birth), and 4) *transpersonal* (relating to spiritual dimensions and experiences that transcend the individual ego or personal history).

The relationship between Stanislav Grof’s and Ken Wilber’s maps of consciousness has been the subject of much debate, but that is not the focus of this article. Rather, suffice to say that during a holotropic session, seekers can have experiences that pertain to any level of Wilber’s spectrum of consciousness. According to Stanislav Grof, this can also include one level, biological birth, which Wilber did not originally include (Wilber, 1997b).

The Grofs believe that having a holotropic experience itself moves a client toward wholeness. From a therapeutic point-of-view, this can be understood as healing; from a personal development or spiritual point-of-view, it can be understood as evolution or transformation. The important point is that the Grofs believe that each holotropic experience moves the in-

dividual to the next appropriate step on his or her journey toward wholeness (Grof and Grof, 2010).

Holotropic Practice as a Full-Spectrum Practice

This article will now suggest the three primary ways in which holotropic practice can be understood as meeting the challenge of a full-spectrum approach to transformation, enabling seekers to “find their way” efficiently. These can be described as *diagnosis*, *healing*, and *prescription*.

Diagnosis

Holotropic practice selects the precise level of the spectrum at which a seeker's effort will be most effective.

In a holotropic state, the psyche seems to select the unconscious dynamic that is most charged—or psychologically relevant—at that time. Stanislav Grof calls this “the psyche's *inner radar*” (Grof, 2000).

The experience that emerges is not one that could have been predicted or planned, but it invariably turns out to be highly relevant to the seeker's growth, according to Grof and Grof (2010). The assumption is that each session *brings a seeker directly to the cutting-edge of his or her personal evolution*—to the issue or question or blockage that is most ripe or relevant in that moment.

There is no external expert who guides or directs this process of diagnosis or discovery—no guru, no therapist. Even those people trained to assist in holotropic sessions (“facilitators”) are trained in *not-knowing*; their primary function is simply to keep each seeker safe and help him trust the wisdom of his own “inner healer” (Grof, 2000; Sparks, 1989).

One could therefore say that holotropic practice determines the level of the spectrum that is most efficient for present growth. More specifically, it reveals the precise experience or learning that will be most useful in that moment.

The holotropic session, through this radar-like feature, is like a highly sophisticated diagnostic tool that instantly pinpoints the problem or potential that is most charged emotionally and most significant. Like a form of internal triage, holotropic practice sorts out what is the most urgent, or the most beneficial, to be dealt with. Often this may be very different from what the conscious mind, or any expert, might have predicted.

Of course, the metaphor of diagnosis is not completely accurate here. In the realm of psychothera-

py, and even more so in spiritual practice, there may be no objectively verifiable illnesses or conditions (short of organic diseases). Indeed, much of the Grofs' work argues against the use of diagnostic categories (Grof and Grof, 1990). Given this, the word “diagnosis” may be too strong. Still, the metaphor is valuable for two reasons:

1) It elaborates on the very metaphor that the Grofs themselves have used to make sense of their data (the “radar” function). In other words, the Grofs themselves suggest that holotropic practice functions in a way that resembles diagnosis.

2) In the clinical experience of the author, many seekers who engage in holotropic practice report that it does help them find “the real issue.” In other words, there is anecdotal testimony from seekers, as well as from their facilitators, that holotropic practice offers something like a diagnosis.

Here are some examples of these anecdotal reports (adapted from some case studies from the author's clinical experience as a facilitator of HB):

Case 1: Jim is chronically angry with his mother, but feels frozen, barely able to express this to anyone and unable to move beyond it. During his holotropic session, however, he re-experiences a car accident that occurred many years before—the moment of impending impact, the way he froze in terror, and the profound shock—and, in the session, is able to release a scream from within that frozen state. This unlocks his anger.

Case 2: Nancy feels frustrated in her practice of meditation. She is starting to lose hope and may give up her practice altogether. During her holotropic session, however, she re-experiences a moment in her birth when the passage was blocked. In the session, she is able to express her full rage at the situation—an expression that would not have been welcome at a silent meditation retreat. This releases the blockage bioenergetically and emotionally, and she then finds that, subsequently, her ability to concentrate in meditation is vastly improved.

Case 3: Frank has taken recreational drugs many times, and is now being overwhelmed by mystical images and is desperately trying to avoid a psychiatric admission. During his holotropic session, he re-experiences a near-death experience in childhood in which he left his body. Exploring

the existential issues involved in this incident helps him to become more “grounded” in his body and feel less overwhelmed.

Case 4: Cathy has been in therapy for many years, working on issues of sexual abuse, but has been locked in a pattern of blame and feels that she is not making any progress. In her holotropic session, she experiences a direct and powerful angelic presence; this experience profoundly opens her heart, giving her an overwhelming and life-transforming experience of compassion for herself and for her abuser.

In each of the above cases, it could be said that doing intensive work at the wrong level of the spectrum would have been inefficient and costly, if not actually counterproductive and dangerous. Thus, the value of holotropic practice as a diagnostic tool could be, first of all, one of efficiency.

Beyond this, holotropic practice can help circumvent some of the epistemological and normative challenges that exist in a world where people can avail of such a variety of therapeutic and spiritual practices. Given that our multicultural, interconnected society now offers people a wide variety of methods, each with its truth-claims, many of which are contradictory, it is likely that even an informed seeker could get confused as to the appropriate method of healing or transformation. Whose truth claims are correct? Which ones are the most effective?

Even the determination of goals within a therapeutic process can be problematic. For example, someone might enter therapy with a goal to get his “normal life” back, but perhaps that is no longer possible, or perhaps this goal is too limited. Indeed, some therapists would argue that the real potential offered by a crisis is not the resumption of an ordinary life but the discovery of an extraordinary one.

When someone is looking for transformation, she is, almost by definition, dealing with the unknown. She doesn't know what her problem really is, what the solution will be, or what particular spiritual insight is lacking. That makes consumer choice in such situations a challenge—a bit like going into a shopping mall, knowing that you need something, but not knowing what that is or where to find it.

In a holotropic session, however, a seeker does not have to know what level of the spectrum to work on, or where his blockage might be, or what the next best step might be. He can do the holotropic session in order to find out. Using holotropic practice in this way—as a method for diagnosis—could be far more efficient than going to the wrong therapist or choosing the wrong spiritual practice.

There is an important additional value offered by holotropic practice when used diagnostically—its ability to help seekers uncover unusual sources of their symptoms. Many people suffering psychological symptoms actually have two problems; the debilitating effect of the symptoms *as well as* the stigma that results from having symptoms that are not matched by external reality (Grof, 1985). For example, consider the situation of a woman who has panic attacks: in addition to the debilitating effect of the panic itself, she must also carry the stigma of being considered “irrational”—i.e. being someone who exhibits unwarranted reactions to everyday situations. It is this secondary problem that can lead her to doubt herself or even question her sanity.

In such situations, where there are seemingly inexplicable symptoms, holotropic practice may enable seekers to discover a story that matches the symptoms. This is because holotropic practice seems to provide both a powerful catalyst for the unconscious as well as an open space—both conceptually and practically—in which an unknown and forgotten story can emerge (Grof, 1985). To follow the example above, the woman suffering from panic attacks might, in her holotropic session, spontaneously relive a birth memory—an experience in which panic is actually an appropriate reaction. Thus, her initial healing may come simply from the relief at realizing that she isn't irrational or crazy and that her symptoms are not actually meaningless.

Indeed, from this author's clinical experience, the discovery of an experiential match—i.e. finding an inner experience that makes sense of previously inexplicable symptoms—is a common occurrence in holotropic practice. This gives seekers a profound sense of relief—reassuring them that they are not feeble-minded, lacking in character, or mentally ill. It also gives them the opportunity to make sense of and release the issue in a meaningful way; at long last, they know what they are dealing with.

In summary, holotropic practice is proposed to act like a diagnostic tool, helping seekers find the most efficient and effective level of the spectrum at which to do the next stage of their work.

Healing

Holotropic practice determines the appropriate healing modality or spiritual practice for an individual at a particular time.

Each form of therapy or spiritual practice has its own list of proscribed behaviors and recommended techniques. For example, in Zen meditation, the instruction might be to sit absolutely still, in order to avoid distraction, but in *tantra*, the instruction might be

to follow every desire until one experiences ecstasy. In bioenergetic therapy, one might be encouraged to punch a cushion to give full expression to one's anger, but in kundalini yoga, the instruction might be to keep anger internal and channel this energy toward enlightenment.

Each one of these recommendations is internally consistent—it makes sense within its model. Each may be effective if the seeker is 100% committed to that system, and if that system is a good match for the seeker's individual history and goals. But how often is that the case?

As Abraham Maslow said, "I suppose it is tempting, if the only tool you have is a hammer, to treat everything as if it were a nail." (Maslow, 1966) Known as "the law of the instrument," this limitation can have disastrous consequences for a seeker, who might suffer tremendously at the hands of a therapist or teacher who yields the wrong tool for his particular needs.

Holotropic practice, however, is open-minded as to what instrument to use, and indeed seems to have a very wide range of these⁵. Clients are simply encouraged to allow whatever is emerging to emerge without judgment. Clients are only required to keep their eyes closed, so that the experience is not projected onto others, and to stay on their mattress, so that they can be kept safe. Beyond that, there are no other limitations: no time limit, no noise limit, no rules of posture or diet or dress, no institutional hierarchy, no guru, no sacred text.

Thus, if the inner experience wills it, clients can scream, cry, chant, pray, regress to infancy, speak in tongues, meditate, move into yoga postures, leave their body, enter their body, punch a pillow, shake, sweat, gyrate — the list is endless.

In other words, it seems that in holotropic breathwork it is the individual's unconscious that dictates the actual form of practice or therapy, without imposition of any external person's academic framework, cultural background, or religious belief. In effect, the individual's unconscious chooses the right form of spiritual practice or therapy, moment by moment. Remarkably, in the holotropic state, it is even common for a seeker to experience a healing modality or spiritual practice (one of the "thousands of wonderful practices", as Wilber calls them) about which he had no prior knowledge.

In this way, the holotropic session provides a physical and emotional space in which many different forms of transformation can be deployed. The actual form and method of transformation is chosen by the unconscious, and is targeted to the emerging experience. One could say that the seeker's "inner healer" chooses the form and method of the seeker's evolution. The lesson learned by each individual, despite its often

universal qualities, remains a unique one.

That the mode of transformation is chosen by the seeker's "inner healer" is important for two reasons:

1) Holotropic practice reduces reliance on external authorities or normative values

Every therapeutic or spiritual practice has a normative component—it is dependent on implicit cultural goals and assumptions. For example, what is the best advice to give someone struggling with chronic anger? Is it better for her to use stress reduction techniques, for her to express her anger, or for her to practice loving-kindness meditation? Another example: If someone is experiencing chronic tension, is it better for him to learn relaxation techniques or to intensify the tension until he reaches "breaking point" and then experiences a breakthrough? Sadly, for most seekers, the answers to such questions depend on who is asked.

Even attempts at objective scientific assessment of the value of therapeutic techniques are normative. For example, conventional researchers might assume that a "good result" for someone with chronic anger would be a rapid reduction in the symptom of anger; but if the goal were defined as empowerment, rather than anger management, then perhaps preserving that anger, at least for a while, could be considered essential to the seeker's growth.

2) Holotropic practice allows the appropriate modality of healing or transformation to vary based on time or stage of development.

It is very difficult to assess the absolute or objective value of a particular form of therapy or spiritual practice. A particular modality might work for someone at one stage of development or at one time in his life, or for one particular issue, but be completely wrong or ineffective for the same person at another stage or time, or for a different issue.

So, for example, a person who suffers from low self-esteem might, at one time, need to collapse in utter despair about his disempowerment; at another time, he might need to roar in defiance. A person recovering from childhood abuse may need to learn, at one time, "It was not my fault," but at another time might need to learn a spiritual lesson such as, "I chose this life in order to further the education of my soul." In each case, there is nothing wrong with teaching, *per se*, but timing is everything. And there is no way for an outsider to know what the right time is; indeed, the seeker's own ego may not even know.

Given the challenges of validating objectively the "rightness" or appropriateness of a practice, the

value of holotropic practice may be that it removes the burden of trying to be “right” from the shoulders of therapists and spiritual teachers. For, in holotropic practice, the offer to each seeker is that she may discover what feels right for her.

In this light, the oft-repeated proverb, “When the student is ready, the teacher appears,” has a novel application. In a holotropic context, the “teacher” is not a person but a teaching—the teaching that is appropriate to each seeker in the moment. So, in holotropic practice, with no external teacher, the student and the teaching are in a relationship that is dynamic, adaptive, and synchronous. This changes moment by moment.

Indeed, in holotropic practice, the form of healing is often surprising in its uniqueness and specificity. Healing happens in ways that are impossible to predict and with a creativity that is itself mind-boggling.

Furthermore, the holotropic session enables the unconscious of each seeker to find a custom-made resolution, no matter how eccentric that solution might be. The metaphor of genetic medicine, with its promise of new medicines that are calibrated to each individual’s specific genetic makeup, could be helpful here, in that holotropic practice seems to offer healing and transformation that are precisely calibrated to each seeker’s unique needs⁶.

Prescription

Holotropic sessions “prescribe” an appropriate practice for a seeker to follow when outside of the holotropic session.

A holotropic session can also give a seeker insight and clarity about his spiritual values, preferences, and needs. Indeed, many holotropic sessions suggest practices that would be useful for a seeker use as a “follow-up” to the holotropic session (personal communication from S. Grof, 1990-2).

At a more profound level, holotropic practice can also help seekers find their spiritual practice (personal communication from S. Grof, 1990-2). In other words, if a seeker is confused about what therapy or spiritual practice to pursue, a useful approach might be to do a holotropic session, see what emerges naturally, and make the appropriate conclusions. Some examples:

Case 5: One person found herself torn between a commitment to *T'ai Chi*, *hatha yoga* and Zen meditation. But after a series of holotropic sessions in which her body spontaneously went into yoga postures, each accompanied by physical healing and spiritual insight, her path was clear. She committed herself to a formal practice of *hatha yoga*.

Case 6: Another person, who normally followed a mystical practice, found that his holotropic sessions focused on a lonely part of his childhood. This gave him an important “prescription” to do some inner child work outside of the sessions.

Having found a new practice through a holotropic experience, a seeker can use this other practice instead of, or alongside, her holotropic sessions, and can do so until the inner dynamic shifts and a different form of practice is indicated. Because of this function, holotropic practice should not be considered simply one of the “thousands of wonderful paths,” but a meta-path. It is a post-modern clearing house for everything from biofeedback and psychoanalysis to Alcoholics Anonymous, past-life regression, Sufi dancing and *kriya yoga*.

This also suggests that, given limited time, it may be better for a seeker to focus on one particular practice-- the one that is most relevant at that time-- rather than attempting to practice all levels at once.

The value of a holotropic session thus seems to extend well beyond the session itself or any healing or learning experienced therein. For the holotropic session can actually give seekers a strong indication of other forms of healing and personal growth worth pursuing at that time.

An additional benefit: “Finding your way”

Wilber’s recommendation that seekers choose one practice for each level of the spectrum assumes that each seeker is already aware of and open to all levels of the spectrum. But this is certainly not generally true. Indeed, much of Wilber’s work is based on the opposite assumption. His aim seems to be to convince modern “flatland” consciousness of the reality of the whole spectrum, and particularly of those levels that are farthest from the conventional (Wilber, 1996). Therefore, it would not make sense to assume that a person at an average stage of development would be interested in or open to a full-spectrum regimen of transformational practices.

For example, someone at a firmly rational level of development would probably not be open to the idea that angelic messengers could heal his suffering. Similarly, he might also be unwilling to accept the value of a regressive experience such as past-life regression or rebirthing. In other words, such practices, whether higher or lower on the spectrum, would be so far from his typical understanding of reality that he would not find them easy to approach or easy to integrate into his life; he could easily dismiss them as being “not rational.”⁷ Thus recommending higher- or lower-level practices to such an individual, as Wilber does, would not

be likely to succeed.

Participation in a holotropic session, however, does not demand belief in all levels of the spectrum. The seeker simply has to trust her experience and see what happens.

Indeed, from this author's clinical experience, it is routine for a seeker in a holotropic session to be profoundly surprised, and not just about his experience, but about the reality of the level of the spectrum that is implied by that experience, whether this experience involves regression or transcendence. This could be considered an additional benefit of holotropic practice: it enables seekers to experience levels of reality that they had not previously thought valid. The key factor here is that the seeker discovers these levels by himself, and becomes convinced of their reality and value through his own personal process of validation.

In this way, holotropic practice can be understood as providing a structure that enables a seeker to consider, and possibly discover, other levels of the spectrum of consciousness. But it does so in a way that respects each person's integrity and autonomy, as well as his need for self-determination⁸.

Some limitations of holotropic practice as a full-spectrum path

Despite the enormous range of experiences and modalities available through holotropic practice, as this article has posited, there are nonetheless some recognized modalities that holotropic practice does not support.

Because the focus of a holotropic session is on the interior of the individual, participants are strongly advised to refrain from opening their eyes or engaging in conversation with other people during the holotropic session. This therefore excludes any kind of dialogical or transactional practice from the process. Thus, during a session, while participants can do much to heal issues about relationship, or even engage in a "conversation" internally, they would not have the opportunity to do this directly with the other person involved.

Similarly, a holotropic session cannot incorporate, by definition, those practices such as Cognitive Behavioral Therapy that require instruction and training, those practices that require a seeker to engage, from a conventional state of mind, or those practices that require attunement to an ordinary state of consciousness (what the Grofs' call "hylotropic").

Furthermore, in the opinion of this author, there can be some bias in holotropic practice against any use of "thinking" in favor of "feeling" or "experiencing." This bias can also be found in other therapeutic and spiritual practices, particularly those that consider themselves "experiential": these practices ex-

clude analytic modes of experience and inquiry, whether that means Freudian psychoanalysis, critical thinking, etc.⁹

Given that holotropic practice does not accommodate all modalities, it is worth considering whether some individual seekers, at certain stages of their process, might not be best-served by it. For example, there may be some seekers for whom a practice that focuses only on the interior of the individual could be harmful or at least inadequate; this might be the case if a seeker were lacking certain life skills and needed occupational therapy, or a seeker required a more interpersonal help, such as couples therapy or group therapy.

That said, there is nothing in holotropic theory that prevents or advises against the use of such practices *outside* of a holotropic session. Indeed, the need for such practices as follow-up work might become clear during the session, as proposed above. The point here is simply to note that it is not possible to follow these other practices *during* a holotropic session; in this regard, the thesis of this article falls short.

Finally, it is worth considering whether holotropic practice is actually a practice in the sense of offering repeated exposure or training in a particular discipline. Does holotropic practice actually help people reinforce a new stage of consciousness and form new habits based on it? Or does it simply help seekers uncover, heal, and explore novel points-of-view on an occasional basis? And do intermittent holotropic sessions qualify as a "practice"? This issue, which is related to the examination of states versus stages of consciousness, is one of particular concern for Wilber (Wilber, 1997b).

A big experience of everything

This article would not be complete without touching on another of Stanislav Grof's theories as it relates to Wilber's spectrum model. From extensive clinical observation, Grof noticed that through numerous holotropic sessions, or even in a single session, a seeker might discover a theme that underlies several of her emotional issues, physical problems, birth dynamics, and confrontation with universal spiritual questions. Grof calls these "systems of condensed experience," or COEXs for short (Grof, 1976). Here is the way in which a COEX might emerge in a series of holotropic sessions:

Case 7: Throughout much of her life, Samantha has suffered from intermittent throat infections (a physical symptom). In general, she also feels inhibited from expressing herself (an emotional

symptom). During her first HB session, she remembers a music teacher from elementary school who viciously told her that she "couldn't sing a note" (a biographical memory). In another session a childhood incident emerges in which her brother tried to strangle her (a biographical memory). In re-experiencing this, she screams and screams — releasing long-held muscular tension in her throat (bio-energetic healing). As her process deepens in subsequent sessions, she experiences a moment of her birth when the umbilical cord was around her neck (a perinatal memory), and she realizes that at a deep, unconscious level, she had always confused the drive to emerge and be free with a life-threatening, choking sensation (an existential issue). Then she has a "past life" experience, as a man beheaded for his religious convictions (a transpersonal event). And in another session, she experiences herself as a swan, singing as it dies (a symbolic, archetypal experience). For the first time in her life, she has the experience of expressing herself *or* dying. In this session, she feels her voice restored, and her fear of death diminished. Following this series of sessions, having released so much fear and tension in her throat, she rarely gets a throat infection.

The theory of COEXs can provide some reassurance and encouragement to those seekers who have been through a variety of forms of self-help—from magic mushrooms and encounter groups to psychoanalysis and rebirthing—but have found, to their frustration, that the same old problems keep reappearing. To those many weary souls, the Grofs suggest that holotropic practice can offer some unique perspectives (S. Grof, personal communications, 1990-2). For example

That it might not be a sign of failure when the same issue keeps emerging in different practices or at different levels; this is how the psyche is structured.

That resolution of an issue may occur only when a certain level has been dealt with. Alternatively, resolution may occur only when all levels have been dealt with.

These insights offer weary or discouraged seekers the possibility that holotropic practice might provide new help—enabling them to find the level or modality through which a more significant resolution or transformation can occur.

There is one more interesting feature of some holotropic sessions, explained by the theory of COEXs, worth mentioning here. In holotropic sessions, it is

common for seekers to have experiences that touch on several levels of the spectrum at once. This can be discerned from the numerous case studies and session reports provided by Stanislav Grof (Grof, 1985, 1988, 1992). For example, it is common for individuals to have a profound spiritual realization at the same time as they have a major physical release. Seekers can even have some experiences that seem to embrace the entire spectrum at once. (This also can be deduced from Grof's case studies and session reports, as per above).

These powerful experiences can give those who engage in holotropic practice a remarkable insight, one that is beyond a healing or teaching that is specific to just one level of the spectrum. Grof and Grof suggest that, in such experiences, seekers become aware that all levels of Being are deeply and meaningfully interconnected (Grof and Grof, 2010). Long before the end of their journeys, or before any subjective or clinical assessment of healing, something else is experienced: an ever-deepening awareness — in the fibers of the body and the fabric of Being—of the seamless-ness of Creation.

Conclusion

For both Wilber and the Grofs, the psyche is inherently evolutionary¹⁰—moving sometimes swiftly, sometimes slowly, sometimes sideways, sometimes forward, and sometimes, it would seem, backward, but always with a drive toward transformation (Grof, 1998; Wilber, 1996, 1997b).

With the spectrum of consciousness, not to mention the subsequent expansion of his theories, Ken Wilber has created a model that reconciles the claims of a wide variety of disciplines.

Holotropic practice, devised and developed by Stanislav and Christina Grof, offers seekers a powerful catalyst for transformation, but just as importantly, offers seekers the freedom to meander everywhere and anywhere within the spectrum, bringing them directly to the cutting edge of their own evolution.

The holotropic process requires only that seekers lean toward the truth that is emerging now and here, in the deepest experience of the present moment. With considerable openness—in model and method—, holotropic practice embraces a wide array of ancient forms of worship and many of the modern means of personal growth; it even holds space for paths yet to be discovered.

Notes

1. Given that the conclusions of this article pertain to both therapy and spiritual practice, this article uses the term “seeker” to refer to a person who is engaged in either. This means that the article can avoid using the words “client” or “patient” (which refer only to therapeutic settings); “subject” (which is specific to experimental settings); and “student,” “disciple,” “initiate,” or “believer” (which are specific to spiritual or religious contexts).
2. Some forms of spiritual practice would even posit that a seeker is not the best person to determine what he needs, as it is the ego (and its perceived needs and desires) that is the problem. In other words, according to these traditions, even the seeker is not to be trusted. This makes the issue of “consumer choice” even more problematic.
3. Wilber’s work has advanced significantly since he first outlined a spectrum of consciousness, in two important ways:
 - a) The names and delineation of levels has changed. That said, it is sufficient for this article to sketch them out roughly, particularly as mapping Wilber’s levels to Stanislav Grof’s cartography is the subject of much debate. The main point for the purposes of this article is simply that there are levels of consciousness, each with its own truth claims and practices.
 - b) Wilber now considers the spectrum of consciousness to be just one of four aspects (or “quadrants”) that comprise reality. The spectrum of consciousness, as originally defined, pertains just to the interior or subjective life of the individual. As the focus of this article is on psycho-spiritual practices, i.e. those that target the interior of the individual, it is limited to just that aspect of Wilber’s work.
4. A truly integral path, Wilber maintains, would also include the inner (“interior”) and the outer (“exterior”) of everything, as well as the cultural or social aspect of each level. Following his lead in the following citation, this article restricts consideration to the interior of the individual.
5. The main tools that are lacking would be *interpersonal* in that the seeker is encouraged to not interact with others during the session. As the following section suggests, however, this form of work could be indicated by the session and adopted by the seeker afterward.
6. In this section, there is one special case worth mentioning. This is when a technique or practice unintentionally activates a psycho-spiritual crisis but the therapist or spiritual teacher involved is not able to support this process. In effect, the seeker has begun to have an experience that is outside of the bounds of that practice or its model. A common example of this would be a person in a meditation retreat who starts to re-experience traumatic memories and becomes too emotional to keep the quiet required. Another example would be a person in grief counseling who begins to experience overwhelming mystical insights about life and death, only to be labeled “psychotic” by his therapist. Holotropic practice is remarkable for the breadth of experiences—even extreme ones—that it can accommodate. (See Grof and Grof, *The Stormy Search for the Self*).
7. This problem, which could be called “stage bias,” is not confined to those people at a rational stage of development. In this author’s clinical experience, a similar problem can be found at any level of development. For example, people considered to be advanced yogis might well object to any suggestion that they might gain some insight from exploring their early childhood issues.
8. As these needs emerge only at a rational stage of consciousness, it would be worth exploring whether holotropic practice is could only have been developed at a rational stage of human evolution. Or perhaps, one could argue that, because of its ability to embrace the practices of many different cultures and truth-claims, holotropic practice is distinctively post-modern.
9. That said, it is the experience of this author that a deeper thinking process does happen spontaneously, sometimes, in holotropic sessions, though this process is rarely labeled as “thinking.”
10. All would probably argue that the entire Cosmos is evolutionary; but that is not the focus of this article.

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