Carl Rogers as Mystic?

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At the heart of mystical experience is a way of knowing that is different from the normal waking state. Such experience is often described as more direct or “authentic” (Puhakka, 1997). This knowing is typically marked by such characteristics as a transcendence of the dichotomy of subject and object, a shift in self identification, a cessation of conventional analytic thinking, a profound sense of interconnectedness, love, and a sense of having recognized some truth (e.g., see James, 1902; Underhill, 1961; Hart, Nelson & Puhakka, in press). Carl Rogers’ descriptions of his own experience in therapy seem to reveal an experience of mystical knowing that is foundational to his approach. While he translated his therapeutic experience into fundamentals that function as postulates (e.g., the need for unconditional positive regard, empathy, etc.), the activity of knowing involved in achieving these experiences may be most instructive and at times discloses a transpersonal process of knowing that is an undervalued dimension of his legacy. A reconsideration of the epistemic aspect of Rogers’ work invites the practitioner into the possibility of a more direct type of knowing.

As a counselor or psychotherapist we typically come to know our client through our analysis of their words and behavior. We hear and observe what is before us, and then form and test out our inferences. At times, we may also find ourselves understanding and connecting with another person to an unusual degree and in a way that does not seem to be provided through logical analysis. We may even allow ourselves, in one way or another, to genuinely participate in their world, crossing the chasm of self-separateness. This meeting is momentously important, for, as Buber (1923/1958) suggests, "All real living is meeting" (p. 11). Therapy presents the opportunity to meet the other with unusual depth. Rogers knew these moments first hand and they provided benchmarks for his work.

When I first read Rogers I was struck by his descriptions of these profound meetings. He was not describing simply a therapeutic technique or strategy but “a way of being” with another. He named the key elements: authenticity, empathy, congruence, and so forth, that actually describe the outcome of the therapist’s (his) experience when he achieved therapeutic “resonance” or deep connection with a client. But it can be difficult to achieve the outcome without understanding how one gets there. While it may be helpful to try to practice
unconditional acceptance or empathy, revealing the activity of knowing that underlies and engenders moments of deep contact may be even more helpful. So how did Carl Rogers know? What was the activity of his knowing like in these special moments?

In one early writing Rogers' description of empathy seems fairly conventional:

The state of empathy, or being empathic, is to perceive the internal frame of reference of another with accuracy and with the emotional components and meanings which pertain thereto as if one were the person, but without ever losing the 'as if' condition . . . . If this 'as if' quality is lost, then the state is one of identification (Rogers, 1959, pp. 210-211).

This is not a description that could easily be understood as mystical knowing. It maintains the distance between subject and object. He is even especially cautious about crossing over that boundary and into the client's world. Further, the idea of empathy as a state implies a more static phenomena than is characteristic of the dynamic process or epistemic event (see Ferrer, in press; Heschel, 1962) of mystical experience. However, it is important to understand the context for this particular definition. It was written upon invitation to provide a theoretical chapter for a major scientific book of the era and he attempted to rigorously define empathy for that project and the anticipated audience. But notice what happens as Rogers' description of empathy moves beyond conventional knowing and crosses the subject-object gap as he emphasizes empathy as a process rather than a state: "It means entering the private perceptual world of the other and being thoroughly at home in it . . . . It means temporarily living the other's life" (Rogers, 1980, p. 142).

He suggests that this knowing is achieved as "you lay aside your self" (p. 143), that is, through a temporary shift in self-identification. His knowing moves from "as if," an imaginative indirect knowing, to actually entering the client's world. Rogers (1980) goes even further when he acknowledges some of his own experiences in group work. He describes a radical shift in awareness: "It seems that my inner spirit has reached out and touched the inner spirit of the other. Our relationship transcends itself and becomes part of something larger" (p. 129). Husserl (1967) refers to this intersubjectivity as a possibility of "transcendental empathy." Some contemporary science as expressed in field theory (e.g., Sheldrake, 1988) provides theoretical support for Rogers' description of radical intersubjectivity.

I also want to briefly note that Rogers' description immediately above ("my inner spirit") is offered as a phenomenological description of his experience and not mere hyperbole. The concept of a multiplicity of selves suggests there are different levels or facets of consciousness on which we operate. Of course this is hardly new, it serves as the base for Freudian theory. But rather than confining these "other" selves to "lower" unconscious process, transpersonal and to some extent humanistic theorists recognize the higher dimensions including a Higher Self (e.g., Assagioli, 1965; Rowan, 1990). Rogers' description might imply an activation of his Higher Self that meets the Higher Self of the client ("my inner spirit touches [theirs]") in order to help the client and therapist see what is needed. I note this here to once again highlight the alternative epistemic process that he intimates is at work.
As we are present and open in a meeting, sequential, calculative mental processing tends to quiet and is replaced by a spontaneous opening of awareness. In describing this non-analytic knowing Rogers (1980) tells us that:

When I can relax and be close to the transcendental core of me, then I may behave in strange and impulsive ways in the relationship, ways in which I can not justify rationally, which have nothing to do with my rational thought processes. But these strange behaviors turn out to be right, in some odd way (p. 129).

Like the mystical encounter, Rogers most direct and profound therapeutic experiences are described as including a feeling of love or appreciation, and of riveting genuineness or realness. He tells us that he experienced this love and honesty in his moments of deep contact with clients and understood them to be necessary conditions for person-centered psychotherapy. What he may not have articulated as clearly was that love and genuineness emerged naturally as part of this style of deep knowing. Note that the hallmarks and goals of most mystical quests include both love or compassion and a belief that only deep realness or truth will do. Our role, persona or the small self retreats as we come to the meeting bare, present and open. As we experience the other deeply (our client or the world at large), there is a sense of appreciation, unconditional, non-judgmental acceptance, or reverence. This is the experience of moving from "it" to "Thou" for Buber and, again, is consistent with the mystics’ descriptions.

Emphasizing such things as genuineness and unconditional regard in training therapists may be helpful; however, aspiring therapists may achieve greater success if training focuses on the process of knowing itself, noting the deepening genuineness and appreciation that is inextricably bound to direct knowing. Some therapists, with the best of intentions, wear their genuineness or acceptance as a role, or use it as a technique or skill. These are not techniques, although they are sometimes diluted into such, but are a way of being in the world. In moving from conceptual understanding to direct experiencing of what Rogers advocated, love, genuineness and awe emerge more naturally.

Carl Rogers is not alone in his descriptions of a more direct style of knowing. For example, Larson (1987), Rowan (1986), and Sprinkle (1985) all refer to a more direct communication as sympathetic resonance. Gestalt therapy recognizes this as using the self as a resonant instrument or “resonance chamber” (Polster & Polster, 1973, p. 18). Mahrer (1993) suggests that “The therapist literally enters completely into being the person” (p. 33). “Instead of being empathic with the person, you are fully being the person. Instead of knowing the person’s world, you are living it” (p. 34). As the therapist enters deeply into the client’s world, he or she experiences becoming the other and forming one merged self. This has been described as "co-feeling" or "co-understanding" (Watkins, 1978). The term projective identification has also been used to describe this process, although the meaning of the term varies tremendously, largely depending on what kind of knowing is assumed to be at work (see e.g., Reik, 1948; Segal, 1964; Scharff, 1992; Tansey & Burke, 1989). And elsewhere I have referred to deep empathy (Hart, in press-b) or transcendent empathy (Hart, in press-a) as possible in the therapeutic meeting.
As therapists, how might we move closer to a knowing that is so ephemeral? This is difficult and I won't offer "how-tos." The knowing is subtle, profound and does not translate into a simple technique but must be lived from the awareness and presence of the individual. However, we can find some clues in Rogers' own work and also identify those characteristics that seem to correspond to the process.

Carl Rogers spoke of creating the right environment or conditions in order for effective therapy to occur. These conditions form a kind of "clearing" (Heidegger, 1977). Buber (1923/1958) refers to the place in which genuine meeting takes place as the "between," and Winnicott (1971) as "potential space," created, as he says, by "the overlap of two play areas" (cited in Davis & Wallbridge, 1981, p. 65), that of the therapist and of the client.

In the counseling literature what has been emphasized is that these conditions and the clearing that is created are helpful for the client to feel comfortable enough to explore and reveal themselves in the encounter and form a relationship with the counselor. But I suggest that these conditions have at least as much to do with inviting a particular consciousness in the therapist. The appropriate conditions enable therapists to make themselves available, open, focused and "in tune" or in communion with the other. This is the role of religious ritual or spiritual practice as well- to evoke a shift in the consciousness of the participant toward some form of communion. As we close the door, focus on the client, and are available simply to understand and appreciate the other person, a shift in our knowing may occur. This emphasis on the environment as being both a form of evocation for the therapist as well as an invitation to the client is a subtle difference but one that is important in encouraging the therapist to fall into the stream of more direct meeting and knowing.

When I look back on my own experience as a therapist I realize that the deep knowings that I experienced with clients were moments when I felt most human and most intimate with the world; and I probably stayed working as a therapist for many years because this provided a practice that brought my heart and wisdom to the surface with some regularity. When the office door closed, I could often depend on a shift in knowing. The focus, attention, intention, and simple curiosity for what the encounter would bring helped to engender genuine meeting. In retrospect, I see that even the basics of active listening were like some martial art that sharpened my attention and allowed the world of my internal chatter to dissipate, inviting an expansion of awareness.

In addition to fostering an appropriate environment, I will note several characteristics that may engender or correspond to more direct knowing. These are not intended to serve as postulates or how-to's, but as phenomenological descriptions of the activity of knowing. They may provide some landmarks as we meander in this territory.¹

In a more direct style of knowing there is a shift from the assimilating and categorizing of objects to a radical accommodation to the other (see Hart, 1995). We move out of steady mental processing of perceptions and thoughts, to meeting and receiving the other directly -- a receptive mode, as Deikman (1984) has named it. Buber (1923/1958) tells us: "The relation

¹ The following section has been largely excerpted from Hart, T. (in press-a).
to the Thou is direct. No system of ideas, no foreknowledge, and no fancy intervene between I and Thou” (p. 11). If we are preoccupied with thoughts of being an empathic therapist or trying to remember what the client said last time, we will distract ourselves from being fully present and making direct contact. This suggests that the degree to which we are present to the other and to ourselves will impact the meeting. As we deeply and simply attend to the other, we may be absorbed in the meeting. Absorption has been identified with mystical and paranormal experience (see Nelson, 1990) because it permits a deep immersion in the field of experience. But while absorption may permit deep experience, the information gained may not be easily used without awareness. An ability to maintain awareness (e.g., see Varela, Thompson & Rosch, 1991) of our own processes, reactions, and changes in the other enables us to be immersed in the meeting and witness it immediately in succession or even simultaneously. Perhaps the most familiar way to describe these aspects of being is to speak of the capacity and willingness to listen. It is this listening or paying attention that permits empathy.

Direct meeting in therapy may involve both reaching out and receiving in. Husserl describes an "emotive and cognitive reaching out to the other in a self-transcending empathic understanding” (Kohak, 1984, p. 206). We may intend ourselves to make contact and this willfulness to risk may move us near the other; but the shift to receive the other, to experience our interconnection, is more like a willingness than a willful intending or grasping. Receiving may imply a temporary receding of the dominance of mental processing that enables a receiving or allowing awareness to take precedence.

In deep knowing, personal boundaries are transcended. Boundaries may be thought of as being more or less permeable or, as Hartmann (1984) calls them, thick or thin. At the more permeable or thin end there is increased sensitivity that enables contact as well as vulnerability. There are those individuals who find themselves particularly sensitive to the psychic distress of others, as well as those at the other end of the continuum who seem relatively impermeable, even impenetrable. Deeply empathic therapists have permeable boundaries and often are adept at regulating the degree of openness. And boundaries are not only between ourselves and another person but are also intrapsychic. Some rejected aspect of ourselves may be "an other," part of our “shadow,” until it is met, and eventually integrated.

So far these qualities have, for the most part, invited depth. However, if our epistemic style is deeply accommodative, it is also flexible. Individualized empathic or perceptual style may enable us to tune into particular dimensions of the other, such as strong feeling or bodily sensations. The therapist may attend not only to the content itself but to the form or style that may be most relevant or understandable to the client. For example, insight into the origins of life scripts may be useful at one moment, deep feeling or pointing out a bodily sensation may be helpful at another. This is not figuring out what is best for the client but allowing our deep connection with the client and our sustained and dynamic awareness to accommodate to the client's needs.

It becomes obvious that what the therapist perceives is dependent on both the client and on the therapist. That is, the therapist's subjectivity serves as a perceptual and interpretive filter, although the degree and style of filtering may vary greatly from one person to the next. Awareness and steady deconstructing and refining of the filtering system fine tunes empathic
capacities. Perceptual and interpretive discrimination develops like any skill so long as the knowledge gained continues to inform the process of knowing itself.

Direct knowing emerges out of a natural impulse toward deep contact -- to know and be known (Palmer, 1993). We see a dimension of the same impulse when we look at natural compassion (Dass & Gorman, 1985/1996), that may spill into social interest (Adler, 1929), critical consciousness (Fricre, 1973) and prosocial behavior. Empathy emphasizes felt-knowing where compassion implies an impulse toward mercy or service. Both spill from the same well of recognizing interconnection. And the "other" need not be a single person, but can include a group, a race, or nature. The extent to which we are able to recognize and be moved by this impulse within us will be reflected in our willingness for meeting.

Loosening up of the attachment and identification with the self enables the possibility of genuine contact. This takes courage and strength to risk exposing oneself and being exposed to the depth of another. Compassion, resonance, awe, and love can emerge because the other does not easily threaten the self, not that the self is invulnerable, but our attachment to it decreases. The intensity of contact is no longer quite a threat to our ego and therefore we are freer to experience the other directly.

In Carl Rogers' work we can recognize both the profound capacity we have for knowing another directly, and the possibility of the therapeutic encounter as genuine spiritual practice. Profound therapeutic meeting of the sort Rogers described may provide an opportunity for deepening our awareness, compassion, and recognition of our connectedness with others. Once a level of proficiency in making and sustaining this deep contact is achieved in session, the next challenge may be to extend the practice outside the safe confines of therapy into meetings in the world at-large, making this direct knowing part of our "way of being."

References


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