

WAKING UP

Psychotherapy as Art, Spirituality, and Science

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The Waking

I wake to sleep, and take my waking slow.
I feel my fate in what I cannot fear.
I learn by going where I have to go.
We think by feeling. What is there to know?
I hear my being dance from ear to ear.
I wake to sleep, and take my waking slow.

O those so close beside me, which are you?
God bless the Ground! I shall walk softly there,
And learn by going where I have to go.

Light takes the Tree; but who can tell us how?
The lowly worm climbs up a winding stair;
I wake to sleep, and take my waking slow.

Great Nature has another thing to do
To you and me; so take the lively air,
And, lovely, learn by going where to go.

This shaking keeps me steady. I should know.
What falls away is always. And is near.
I wake to sleep, and take my waking slow.
I learn by going where I have to go.

~Theodore Roethke~

Introduction

In 2002 my wife, Becky, listened to a tape of a lecture by David Deidaⁱ and we were especially loving with each other the following week. She was so impressed that I looked at one of his books but resisted the material, possibly because I unconsciously realized the vast changes that might occur if I really understood the teaching. Sometime later Becky and I went to one of his lectures and I was blown away. His descriptions of sexual polarity and masculine/feminine essences and aspects rang completely true. I realized later that the ideas that we are born on earth to serve each other and that masculine and feminine serve differently were beautiful, good, and true to me. They met the three great validity standards that Plato had written about, that Immanuel Kant had explored in his treatises, and that Ken Wilber had integrated into his elegant conceptualizations of the four quadrants.ⁱⁱ The principles and practices were beautiful to me, they felt morally right, and I had observed external evidence of them every day of my life.

I immersed myself in the teaching. I listened to Deida's lectures, read his books, flew to New York to participate in a four-day workshop, and used his material in my work. My clients began developing much faster in their ability to grow and love. Work was more fun. My marriage, already great by my standards, blossomed.

How could it get better than this? Well, in Winter of 2003 I listened to Ken Wilber's tape series from his book, *A Brief History of Everything*, which introduced me to the Integral perspective.ⁱⁱⁱ The Integral perspective is the naturally occurring epistemology of knowledge, human development, and spiritual experience that Ken Wilber has discovered and developed in a lifetime of study and writing. I was mildly interested at first, but as I gradually moved more deeply into the system it captured my attention and imagination. I hungered for more. Wilber's books, *Sex, Ecology, and Spirituality*, and *Integral Psychology*,^{iv} were like rich chocolate. Each paragraph was a delicious morsel that released a new facet of understanding and expansion. I added his work to my ongoing reading list and immediately found that combining an Integrally informed perspective with David Deida's teachings about sacred sexuality created new dimensions in my individual and conjoint psychotherapy. I've since found that applying what Wilber now calls the Integral Operating System to any approach expands and enhances understanding and practical applications enormously.

We all have various combinations of masculine and feminine aspects in our basic natures as human beings. Almost all of us, when we're most relaxed and open, are more masculine or more feminine in our deepest heart. We suffer if we don't live a life that honors the truest expression of our deepest masculine or feminine sexual essence. We feel more at peace with ourselves and our world when we can discern and relax into whatever aspect of us the moment requires. When we are wide open, without restriction, and experience ourselves as serving love right now, our life tends to feel full and meaningful.

We all develop physically, emotionally, cognitively, spiritually, morally, interpersonally, and psychosexually from conception onward. These are a few of over twenty lines of development that all humans share. We grow on these lines through levels, each level including and transcending previous ones. At any moment we can inhabit a state of functioning at any level on any developmental line in our life. We can be immature, jealous, wise, dense, loving, or hurtful. An Integrally informed psychotherapeutic perspective helps pinpoint what types of person we and our clients are, how we are being influenced by internal and external sources, what our current levels and states of functioning are on what relevant developmental lines, and suggests what perspectives, states of consciousness, and focus of attention might be necessary to serve love and growth.

In 1979 I was in the front room of a beautiful old house in North Hollywood with my wife Becky, a couple of friends, and a Taoist healer/martial artist named John Davidson. I had just ended my first healing session with him and was shaken physically and spiritually. His treatment style combined

bodywork, psychotherapy, martial arts, and Chinese five-element theory, and was intrusive, physical, and demanding. After we finished the session I told him I intended to learn his system, and he said, “Sure.”

We got to talking martial arts, and I told him I’d been training in several systems for fourteen years. He stood up and said, “Show me.” I faced him, bowed, and attacked him with a classic Shotokan Karate technique, oi-zuki, lunge punch. It was a good attack. My focus was centered, my kiai was loud and startling, and my movement was quick and powerful. He felt me coming and, at the last moment, flicked out his right middle finger and struck me perfectly between the eyes with his fingertip. It stopped me cold, and afterwards I had a little indentation directly on my third eye.

That was a beautiful moment. One form of masculine bliss is loving challenge, and nothing is more challenging to a martial artist than being defeated by a fingertip. John’s healing work and fighting style revealed exciting new possibilities, and I studied and practiced enthusiastically over the next two years resulting in paradigm shifts in my therapy, my martial arts, and my life.

David Deida’s teachings on sacred sexuality, and Ken Wilber’s teachings about the Integral approach have had a similar effect. They’ve awakened me to major new possibilities in understanding life, love, sexuality, and healing, resulting in paradigm shifts in my therapy, my relationships, and my life. Psychotherapy has become more fun and my clients get better faster and farther. I’m more confident helping them to be healthier and to love better. I have access to new perspectives that guide me to understand more deeply and intervene more gracefully.

Years after I finished the first draft of this book, I read in the last chapter of Wilber’s *Integral Spirituality*^v that he believed the Integral Operating System to be psychoactive in that internalizing it created an ongoing process of personal transformation. Since 1956, educators such as J. Bloom^{vi} have generally accepted that learning often progresses through six stages: knowledge, comprehension, application, analysis, synthesis, and evaluation. What has not been generally understood is that some bodies of learning, once processed through all six stages, create permanent changes in information processing, emotional response, and worldview. I believe the Integral Operating System, the principles of masculine, feminine, and sexual polarity, and a number of other perspectives presented in this book are potentially psychoactive forms of knowledge that can create and sustain ongoing awakenings in every aspect of our lives.

Though inspired by the teachings of Ken Wilber, David Deida, and many others, this book does not attempt to definitively represent any theoretical formulation, organization, or author other than myself. It is designed to bring together a number of perspectives as I have found them to optimally apply to psychotherapy.

Waking Up is my current best understanding of the theory and practice of psychotherapy. My hope is that this book will inspire you to include these ideas and applications to your best understanding of the theory and practice of psychotherapy to establish a waking up process in your personal life, relationships, and work.

Psychotherapy is cocreative art.

Psychotherapy, like most art forms, develops and changes over the life of the artist. New systems, and new applications of old systems, intertwine with our personal development and our clients’ offerings in the crucible of the therapy session. Over the life of the therapist/artist this cocreation unfolds in the classic include and transcend developmental rhythm of human growth, leading to exciting new possibilities.^{vii} I believe the process of personal/professional development is more important than any single aspect of content, so I encourage you to hold any facet of the material you encounter in this book lightly. Take what appeals to you and try it out in work and life to feel how it fits into your unique style as an artist and a healer.

I learn psychotherapeutic theory and practice best when I can understand the principles, have the applications described, and then see them in action. I’ve organized this book to generally follow that

pattern. All the client examples are composites of individuals and couples I've worked with over the years. There are more segments from conjoint sessions because I believe conjoint work is in many ways more demanding than individual work, less understood than individual work, and because conjoint sessions often better reveal the dynamics of sexual polarity that are so important to human existence. Marriage and family difficulties account for about half of all visits to psychotherapists.^{viii} The transcripts of exchanges between clients and myself are presented in relatively short series because that's how psychotherapy often progresses: in series of exchanges, very much like foil fencing.

I've also included some of my interior experiences during the sessions in the form of perceptions, thoughts, feelings, judgments, and impulses. When studying with other therapists, I've found that such material helps me better understand and apply what I'm learning.

This book is fifty-two Chapters arranged in seven Sections:

- Section One, **Foundations** (Chapters 1–3), explores the process of therapy, introduces masculine and feminine types in therapy, and introduces the basic conceptual framework of the waking up approach to psychotherapy.
- Section Two, **The Integral Lens** (Chapters 4–6), gives an overview of Wilber's Integral approach including definitions and examples of quadrants, lines, levels, states, and types as they apply to psychotherapy.
- Section Three, **Polarity** (Chapters 7–11) explores the masculine and feminine theoretically, spiritually, practically, and especially from the perspectives of how the principles can apply to psychotherapy.
- Section Four, **Cultivating Compassion and Depth of Consciousness** (Chapters 12–23) explores psychotherapy first through two definitions.
 - Cultivating compassion and depth of consciousness to support healthy perspectives and actions.
 - Co-creating a healing culture in which the client and the client's universe are cherished, each moment is experienced as a gift and an opportunity, and healthy perspectives and actions are considered beautiful, good, and true.
- Section Four continues with exploring the purpose of psychotherapy and the process of psychotherapy which are defined respectively as:
 - To remediate symptoms, enhance health, and support development.
 - To relate, teach, inspire, confront, interpret, and direct.
- Section Five, **Lines and Levels** (Chapters 24–34) explores the huge importance of thinking developmentally from a variety of perspectives including evolutionary psychology, parenting, psychopathology, the masculine and feminine, and psychotherapy with adults, children, adolescents, couples and families. In Section Four we also follow the developmental arc of a man and a woman (Allen and Evalyn) from conception to unity with all.
- Section Six, **States In Psychotherapy** (Chapters 35–45) begins with exploring waking, dreaming, and deep sleep states, and their applications and significance to psychotherapy. We then move to identifying **states of healthy response to the present moment** and **defensive states** of amplified or numbed emotion, distorted perceptions and thoughts, destructive impulses, and diminished capacities for empathy and self-reflection. These defensive states are further refined as manifestations of **neurotic, characterological, and relational defensive structures**, with corresponding indications for treatment and clinical examples.
- Section Seven, **Conjoint Therapy; Working With Lovers** (Chapters 46–52) explores the special characteristics and demands of the conjoint session, with Chapter 52 being a case study of one example of **sex therapy**, an important subcategory of conjoint treatment in general.

Section One

FOUNDATIONS

CHAPTER ONE

Psychotherapy—How is it Possible?

As therapists we want to interact with our clients in ways that help them remediate symptoms, enhance health, and support development. To do this we relate, teach, inspire, confront, interpret, and direct throughout the session in a variety of ways depending on what we and our clients bring into the room.

In many ways this is an impossible task. Imagine you are a therapist in an initial session with a client. You have an hour. What relevant dimensions need attention?

Is your client physically comfortable, healthy, or in balance? How can you tell?

This client has consciousness, a sense of self. Are they comfortable or uncomfortable with their sense of self? How can you tell?

Your client is a social being, embedded in various social networks and relationships. Is there harmony or conflict in these social frameworks, and how can you tell?

Your client probably has both a masculine aspect of deep consciousness, hunger for purpose, and attraction to feminine radiance, and a feminine aspect of radiant love, yearning, and attraction to masculine presence. Your client almost certainly has predominantly a more masculine essence or a more feminine essence in their sexual relationships and in their social and professional networks, and can be more open or blocked in different areas in different circumstances.^{ix} Where is your client open and true to his/her deepest sexual essences, or blocked and constricted? How can you tell?

Your client is developing simultaneously on a variety of developmental lines such as self, cognitive, moral, spiritual, psychosexual, and relational.^x What lines are most important to their current work? What levels of development are their centers of gravity (their current, most natural level of functioning) on those lines? What do they need to support development on those lines? How can you tell?

Your client remembers the past consciously, unconsciously, and in bodily tissues.^{xi} Is the past a peaceful place? Where do they feel liberated and strengthened by the past, and where do they feel shackled, wounded, or disabled by the past? How can you tell?

Your client anticipates and conceptualizes a future. Do they anticipate with pleasure or pain? Is there peacefulness with their path to inevitable death, or terror, anger, or numbness and dissociation? How can you tell?

Your client has a felt spirituality, a constellation of physical sensations and cognitive constructs that they identify as a sense of the sacred. This sense of the sacred can be associated with any number of things such as prayer, meditation, nature, love, family, communion with others, work, play, life, death, places, ceremony, or ideas. It is not an intellectual construct as much as an interior, visceral experience that identifies a spiritually charged area. This felt spirituality, either consciously and/or unconsciously, yearns both away from the body for oneness with transcendence beyond physical reality, and also into the body for feeling spirit in all of nature, sensation, pleasure, pain, and communion with others.^{xii} Where are these ascending and descending spiritual hungers being satisfactorily met, and where are they not? How can you tell?

Can your client effectively self-regulate and self-soothe in all environments and life circumstances, or does the environment sometimes intrude in the form of other peoples' attempts

to regulate and/or soothe them, or in other life stressors such as illness, injury, or failure? How can you tell?

Your client has responsibilities to self, work, family, and relationships. Are these responsibilities powerfully and joyfully embraced, or are they experienced as burdens and constraints, perhaps even as miseries in response to perceived collapse and failure in felt duties (duties they have accepted on an emotional basis in areas such as profession or marriage)? How can you tell?

Your client needs a sense of personal meaning and/or deepest purpose. Are these needs identified and satisfactorily met, or does your client suffer from not knowing or being true to his or her deepest meaning or purpose? How can you tell?

Your client has a constellation of defensive states that can be cued by perceived threat. These states have characteristic amplified or numbed emotion, distorted perceptions and thoughts, destructive impulses, and diminished capacities for empathy and self-reflection.^{xiii} How do you help this person cultivate awareness and abilities to shift into healthier states of consciousness, and how can you tell when they do?

You, as therapist, experience a wide array of perceptions, sensations, thoughts, feelings, judgments, and impulses during the session. How do you process and act on these to best help your client?

Now imagine that your client is joined in the session by his or her lover who also has all the above issues and concerns. This lover probably has a more masculine orientation if your client is more feminine or a more feminine orientation if your client is more masculine.^{xiv} This lover has all the issues we just explored and shares with your client desires to love and be loved more, and to hurt and be hurt less. The complexity of the session has just increased by an order of magnitude. Relationships are living, intersubjective, energetic and behavioral systems that have their own patterns and demands, relational defensive structures, and strengths/weaknesses that involve varying degrees of self-awareness and varying abilities to self-regulate. Within this system there are two sets of individual characteristics, defensive structures, goals, and agendas, plus relationship issues. How do you prioritize and address all these new factors?

Good therapists cycle through multiple perspectives.

Let's face it. It is impossible to simultaneously address this overwhelming wealth of material in general, much less in one hour. What good therapists do is cycle (either consciously and/or unconsciously) through multiple perspectives during the session. These different perspectives enable therapists to identify issues, prioritize agendas, discern interventions, and maintain a healing culture in the session.

Most therapists develop an array of interconnected perspectives to guide them in understanding and nourishing their clients in the above domains. This array of perspectives serves to reveal each client's current functioning within frameworks that support remediating symptoms, enhancing health, and supporting development.

The Beautiful, the Good, and the True

Ken Wilber has written how each moment is experienced from multiple perspectives, many of which can be grouped into "I," "we," and "it."^{xv}

The "I" is our individual, inner subjective sense of who is looking out through our eyes, and who feels attraction or repulsion, positive or negative, toward most experiences. What "I" am subjectively drawn to or repulsed by involves the "beautiful" validity standard that each of us

brings to bear on all that we sense. Something attracts us or repels us; it is more beautiful or more ugly. What “I” sense is subjective in that it varies according to my reactions and aesthetic values. Goat cheese might taste beautiful to me but taste ugly to you.

The “we” is our shared inter-subjective sense of unity with others in personally important social groups. These groups are characterized by shared understandings of what is right or wrong, moral or immoral, good or bad. “We” might agree that murder is bad, and altruism is good. “We” involves the “good” validity standard that is characterized by a sense of relative, inter-subjective texture to our experience. “We” is subjective in that it varies according to milieu and culture and reflects what we experience as shared inner validity standards that depend on a felt sense of right and wrong. A bikini is a morally acceptable garment on a California beach, but might evoke physical assault in Saudi Arabia.

“It” is an object. We can externally view people, places, things, thoughts, feelings, or beliefs as objects that can be externally represented through scientific, replicable observations. If we disagree on an observation, we can test it experimentally to resolve our differences, and our results can be verified through scientific method. This objective, externally observable, and scientifically verifiable validity standard can be referred to as the “true.” An apple is tossed into the air and it falls. This experiment can be repeated and verified endlessly by anyone. The apple is always objectively an apple, and it always falls. The majority of students in any elementary school are under 12 years of age. We can verify this objectively through research and statistical representation. It is “true.”^{xvi}

You are a wife, in a therapy session with me, waiting for your husband to show up for the session.

Imagine you’re a wife who has scheduled a conjoint therapy session with your husband and me, and he is fifteen minutes late. I see your breathing speed up and rise higher in your chest, your shoulders and jaw tense, and your hands tremble. Videotape would verify this “true” observation. Such behavioral information involves the “it,” the externally observable, the “true” validity standard. Internally, you might be feeling angry with your husband. This involves both the “I,” the “beautiful” validity standard that tends to be a function of your personal, subjective, “I” universe, and the “we,” the “good” validity standard that tends to be a function of shared standards. To you it is clearly not beautiful for your husband to have failed to arrive on time. It does not attract you or open you; rather it repulses and closes you. Further, his lateness violates your moral “we” standard for punctuality. You have a belief that you experience as shared with important social groups that it is “wrong” to be late to therapy sessions.

We get a call from him and find out he was in a car accident that was not his fault. You continue to be angry at him for being late, and I bring my own felt “wrongness” of your current anger to your attention (after all, someone could have been killed), and you feel a little embarrassed or ashamed. You and I have a shared “we,” moral sense of what is a good or bad, right or wrong, response to a husband being late to a session because of a car accident that was not his fault, and most people in our culture would agree with us.

I, we, and it: the individual, subjective interior, the shared inter-subjective interior, and the externally observable, scientifically verifiable exterior: the beautiful, the good, and the true.

The beautiful, the good, and the true in therapy.

To some extent, we bring the beautiful, the good, and the true validity standards to bear on each experience in every moment. Much of psychotherapy is opening up conflicted areas in our clients to shared awareness so they can bring to bear their sense of felt truthfulness (a combination of all three validity standards), and thus have healing insights (awakenings) that pull them into healthier states of consciousness, healthier perspectives, and healthier actions. In the

above example, your husband finally makes it to the session, and you hug and kiss him, glad to see him, grateful he is uninjured and this feels good, moral, and right, to all three of us. Your devotional love makes you beautiful to him. His presence with you, the fact that he accomplished his mission of making it to the session, and his added depth from being on the subjective edge of death in his car accident, makes him beautiful to you. I observe your energetic polarity through a variety of subjective, “I,” internal mechanisms in my body and mind, and objective, “its,” external cues of your expressions, your words, your tones, and your body language, and, knowing from externally verifiable social research that couples who can connect in this fashion have a better chance of being able to go deeper into love, I find what’s going on beautiful, good, and true.

It can be useful to consciously attend to the beautiful, good, and true.

I suggest you evaluate everything presented in this book by these three validity standards. Does the material attract or repulse you? Does it feel good or bad, right or wrong, from a moral perspective? Is the material “true,” consistent with scientific research and/or observable experience? You might notice in your life how you naturally bring these standards to bear in crucial situations or in casual everyday moments. If you are a therapist, you’ll probably notice how central and important the beautiful and the good are in treatment. Much of your clients’ decision making is dominated by what attracts or repels them in self and others, the beautiful. Most of your clients’ experiences of emotion, thought, impulse, and behavior will have a flavor to them (and you) of moral or immoral, right or wrong, bad or good. Scientific, “it,” “true,” research has demonstrated that individuals and couples who generally feel positive about themselves and their lives (“beautiful”), and moral within their ethical frameworks (“good”) are healthier people with fewer physical and emotional symptoms, and generally better relationships than individuals without these qualities.^{xvii}

The beautiful, good, and true validity standards are invaluable in psychotherapy. An example of this is the following exchange between me and Mary and Dennis, a couple in their 50’s (like all clinical examples in this book, Mary and Dennis are composites of people I’ve worked with over the years). Both are college graduates, professionally successful, and dedicated parents to their three teens. Under stress, Dennis tends to coerce and bully, while Mary tends to comply codependently and passive-aggressively. This is their seventh session:

Dennis: “All I did was ask her to go into the lingerie store.”

Mary: “I went into the store.”

Dennis: Sarcastically “Right, but you were completely not into it.”

Keith: This is a familiar pattern. I want to encourage them to shift out of defensive states and off of critical judgments into more useful perspectives. “Mary, was it attractive or repulsive to you to go into the lingerie store?”

Mary: Hesitantly, fearing Dennis’ critical judgment. “When you put it that way, it was repulsive.”

Dennis: Distressed, and so he attacks. “I just wanted to add some spice to our marriage. God knows we need it.”

Keith: Teaching, enticing them towards new perspectives. “There are three validity standards we bring to each moment. The first is what is externally observable and scientifically verifiable; what is true. The second is what attracts or repulses us individually; what is subjectively beautiful or not. The third is what feels right or wrong, moral or immoral; what is bad or good. These are the beautiful, the good, and the true validity standards. To you, Mary, it was not beautiful to walk into the store; it was repulsive. To you, Dennis, it was attractive to walk into the store; it was beautiful.”

Mary: “He should know I wouldn’t be interested.”

Dennis: "I saw she was reluctant, but I thought it would help our marriage to do it."

Keith: "Did it?"

Dennis: "I guess not."

Keith: "So now you're trying to argue with her that what she finds repulsive should be beautiful. That's like telling her she should love a movie that she hated."

Mary: "It probably would be good for us to go to the lingerie store if we were getting along better."

Keith: "So you agree that it's not bad, or immoral, to shop in a lingerie store together?"

Both: "Yes."

Keith: "So this met the shared "good" standard for both of you, and, probably, couples that shop in lingerie stores do better, so it met the "true" standard for both of you, but it didn't meet the "beautiful" standard for you, Mary. For a shared decision to feel right, it needs to feel beautiful, good, and true to both of you."

Dennis: Interested, in a state of healthy response to the present moment. "How do you make that happen?"

Keith: "The way you make it happen, Dennis, is to stay connected to Mary's experience when you offer direction like that, and, if it's not beautiful to her, back off. That's one way for you to be a more trustable man."

Introducing the concepts of the beautiful, the good, and the true creates possibilities for consciously considering multiple new perspectives in their lives. These new perspectives support a language of non-critical evaluation that is crucial to one of the many paradoxical activities of psychotherapy, creating a sense of safety by communicating interest, love, and acceptance, while encouraging courageous exploration of threatening, destructive, and otherwise difficult to accept aspects of self and other.

ⁱ Deida (2006)

ⁱⁱ Wilber (1995)

ⁱⁱⁱ Wilber (2000)

^{iv} Wilber (1995, 2000)

^v Wilber (2007)

^{vi} Bloom (1956)

^{vii} Kegan (1982)

^{viii} Harvard Mental Health Newsletter (V23, #9, 2007)

^{ix} Deida (1995)

^x Wilber (2000)

^{xi} Siegel (1999)

^{xii} Wilber (2003)

^{xiii} Witt (2007)

^{xiv} Deida (2004)

^{xv} Wilber (2003)

^{xvi} *Ibid*

^{xvii} Gottman (1999)