

Psychology, Psychiatry

A revolution is currently going on in relation to sanity and madness, both inside and outside psychiatry.

Any psychologist or psychiatrist who tries to repeat Dr. Leary's experiments will get thrown in jail.

Drugs could free man's consciousness and bring about a new conception of man, his psychology and philosophy.

Eastern philosophy and psychology is more easily adapted to the findings of modern science than the logic of Western psychology.

I know from first-hand experience that the LSD-type drugs in the right hands are superb psychiatric tools.

If a member of a typical congregation were to have a profound religious experience, its minister would very likely send him to a psychiatrist for medical treatment.

If psychologists largely ignore this whole area, the students then dismiss psychology as an academic word game of no importance.

In psychology, the psychedelics have provided the key to the unimagined vastness of the unconscious mind.

In the right psychological environment, these chemical mind changers make possible a genuine religious experience.

It has deep and revolutionary implications for the understanding of psychopathology and offers new therapeutic possibilities undreamt of by traditional psychiatry.

It is hard to imagine a more useful way to combine medicine, psychology and religion than psychedelic therapy with dying individuals.

It is unfortunate that most of the scientific studies on creativity have been done by psychologists who don't have a creative bone in their body.

Jung's psychology returns the cosmic status to the psyche and re-introduces spirituality into psychiatry.

LSD could trigger a peak experience with therapeutic benefits on psychological growth and self-actualization.

LSD in psychiatric use is much more often said to have prevented suicide than to have caused it.

LSD is a catalyst or amplifier of mental processes. If properly used it could become something like the microscope or the telescope of psychiatry.

LSD subjects frequently report that the flow of music helps them to let go of their psychological defenses and surrender fully to the experience.

LSD translates into the language not just of religion, psychology and psychotherapy, but also of the physical and biological sciences.

Many of the states that psychiatry automatically categorizes as symptoms of mental disease are actually important and necessary components of a profound healing process.

Many states that mainstream psychiatry considers bizarre and incomprehensible are natural manifestations of the deep dynamics of the human psyche.

Maslow suggested that such experiences might be supernormal, rather than subnormal or abnormal and laid the foundation of a new psychology reflecting this fact.

Most nonordinary states of consciousness are considered pathological and are treated with traditional psychiatric methods such as suppressive medication and hospitalization.

No matter how much mental training and psychological exploration had been done, further realms of experience could be revealed by the psychedelics.

No psychological health is possible unless this essential core of the person is fundamentally accepted, loved and respected.

Once one realizes that the single authorized version of reality psychiatrists promote with their talk of “reality testing” is a fiction, there is no going back.

Once the threshold of altered consciousness has been crossed, we are flooded with a kaleidoscopic vision of extended perceptual fields and psychological insights.

Our neglect of these experiences of great value has rendered psychology stale and savorless.

Our understanding of these most complex and fascinating of drugs remains incomplete, and they represent unfinished business for psychological research and psychotherapy.

Psychiatric propaganda creates an atmosphere of fear rather than of courage and trust. If the psychiatrists had their way, we'd all be patients. (That was Timothy Leary.)

Psychiatrists secretly drop LSD into the water glasses of psychotic patients and report that LSD enhances insanity.

Psychological problems may have to be encountered before a “breakthrough” into mystical consciousness is possible.

Psychology in general has failed to keep pace with personal explorations in altered states of consciousness.

Psychology, that discipline which treats of mind's nature, man's view of himself, is always the last to adapt to a new world view.

Schizophrenics have more to teach psychiatrists about the inner world than psychiatrists their patients.

Some psychiatrists very early saw the remarkable potential of LSD for telescoping many weary hours of psychotherapy into a brief, intense experience.

Step by step, spirituality is making a comeback into modern psychiatry and into science in general.

The ego is not a psychological or physical organ; it's a social convention, like the equator, like the clock or calendar or like the dollar bill.

The ego is a social convention, like the intervals of clock time, as distinct from a biological or even psychological entity.

The experience of psychological and spiritual rebirth is typically associated with a sense of joy, compassion and reverence for life.

The experiences they produce are of an infinite variety. They might be aesthetic, psychological, philosophical insights or emotional releases.

The healing potential of ecstatic states is of such paramount significance that it suggests an entirely new orientation in psychiatric therapy.

The importance of the inner subjective and meditative, as well as introspective capacities, has been rejected by the orthodox psychologist.

The most profound recent development in psychiatry has been to redefine the basic categories and assumptions of psychiatry itself.

The rediscovery of these experiences and the recognition of their heuristic relevance has been one of the major incentives for the development of a new movement in psychology.

The scope of psychology is complex, dealing as it does with processes which are ever-changing.

The significance of the LSD observations transcends the framework of psychiatry and psychology and extends to many other scientific disciplines.

The significance of the psychological components in the mechanism of pain relief induced by LSD is unquestionable. (This refers to physical pain.)

There are no specific psychological reactions to these drugs; there are, rather, various reactions.

There has been no recognition of spirituality in Western psychiatry and no notion that there might be some difference between mysticism and psychosis.

These experiences occur in a complex psychological, philosophical, mythological and spiritual context.

These plants and drugs as expanders of human consciousness could revolutionize psychology and philosophy.

This is a matter of immediate experience, a psychological fact which has been recorded in folklore and the religious literature of every age and country.

To the biological, physical and psychological sciences, man is a pattern of behavior in a field.

To the ordinary institutional-type psychiatrist, any patient who gives the least hint of mystical or religious experience is automatically diagnosed as deranged.

Traditional psychiatry has never adequately explained these forms of experience, their universality, and their cultural as well as psychological importance.

Traditional psychology makes no distinction between psychotic reactions and mystical states.

Transpersonal psychology brings together the ancient wisdom and spiritual systems of the world and the pragmatism of Western science.

Used therapeutically, a psychedelic drug might help to resolve a neurosis or other psychological problem and therefore release creativity.

We must discover new mental energy sources for overcoming our society's psychological inertia and anachronistic state of mind.

Western psychology has ignored the possibilities of mind-expansion and has become almost externally oriented.

Western psychology recognizes no methods or possibilities of getting off the imprint board.

A deeper understanding of the transformative process, based on the synthesis of historical, anthropological and experimental data, could have important implications for many different areas, including psychiatry, art, philosophy, religion and education.

Awakening almost necessarily involves a sense of relief because it brings to an end the habitual psychological cramp of trying to grasp the mind with the mind, which in turn generates the ego with all its conflicts and defenses.

Clients who experience psychological death-rebirth and/or feelings of cosmic unity tend to develop a negative attitude toward the states of mind induced by alcohol and narcotics. This has proved extremely useful in the treatment of alcoholism and drug addiction.

Experiencing the profound psychological changes induced by LSD is a unique and valuable learning experience for all clinicians and theoreticians studying abnormal mental states.

I, as an experienced student of the psychology of religion, can no longer pursue research in the field. This is a barbarous restriction of spiritual and intellectual freedom. (That was Alan Watts.)

I felt strongly that the study of nonordinary states of mind in general and those induced by psychedelics in particular, was by far the most interesting area of psychiatry and decided to make it my field of specialization. (That was Stanislav Grof.)

Jung and his followers brought to the attention of Western psychology the utmost significance of all the symbolic variations on the theme of death and rebirth in our archetypal heritage. (This is way beyond what Freud knew, wrote or talked about.)

Leary felt that LSD's significance lay beyond all social analysis and all psychological categories and since the drug experience was completely unique, a new model was needed, a new structure.

Magic is a psychological branch of science, dealing with the sympathetic effects of stones, drugs, herbs and living substances upon the imaginative and reflective faculties and leading to ever new glimpses of the world of wonders around us.

Male-female union is a natural biological and psychological vehicle for transcendent experiences, a merging which can be more complete and intertwined than they had ever dreamed possible.

Millions already know that beyond the fears of the state-sanctioned psychiatry and governmental policy, under the right set and setting psychedelics can lead to joy, mystery, rebirth and realization beyond belief.

Much of the combined efforts of psychiatrists, psychologists, neurophysiologists, biochemists and other related professionals is one-sidedly directed toward interfering with processes that have unique therapeutic and transformative potential.

Our society and our intellectuals and our scientists externalize the psychology of behaviorism. Neurology today is poking at the brains of other people. You have to experience what you are symbolizing.

Patterns of nature which the language screens out are, in psychological terms, unconscious and repressed. Social institutions are then in conflict with the actual pattern of man-in-the-world.

Psychedelic drugs offer new perspectives on every aspect of human thinking, human behavior, human searching. There is no issue in psychology, physics, biology and theology which cannot make use of these microscopes of consciousness.

Psychedelic drugs were used for more than 15 years by hundreds of competent psychiatrists who considered them reasonably safe therapeutic agents. (This was between 1950 and the mid 1960's. These psychiatrists were not radicals or rebels.)

Psychedelic research will be of great value in such diverse areas as philosophy, parapsychology and the creative arts and in the study of literature, mythology, anthropology, comparative religion and still other fields.

Psychiatry has "put-down" words for every human emotion, as "euphoric" for happy, "fixated" for interested and "compulsive" for determined. (Will psychiatrists ever widen their scope?)

Psychologically, the psychedelics promised easier access to repressed unconscious materials, shortcutting the years and prohibitive expense of psychoanalysis. In behavior change, they held the promise of reducing the recidivism of paroled prisoners.

Psychologists, philosophers, and educators who are unfamiliar with consciousness research will be as out of date as they would be today if they were unfamiliar with Freud, Skinner.

Researchers who have seriously studied and/or experienced these fascinating phenomena realize that the attempts of traditional psychiatry to dismiss them as irrelevant products of imagination in the brain are superficial and inadequate.

Sometimes the "doors of perception" are cleansed suddenly with a jolt; sometimes the cleansing comes gradually with ever increasing discoveries. These discoveries may be psychological insights or may be made through any of the senses.

Take LSD in a nuthouse and you'll get a nuthouse experience. These poor patients are usually not even told what drugs they're given; they're not prepared. I consider this psychological rape. (That was Timothy Leary.)

The ability to see patterns, far from being a psychological weakness to be treated, is a vital capacity of the unconscious mind that must be developed and allowed to interact with our conscious perceptions.

The concepts and practices found in the Buddhist, Hindu, Christian, Islamic and other mystical traditions, based on centuries of deep psychological exploration and experimentation, are indiscriminately ignored and dismissed.

The conventional wakeful state in which awareness is hooked to conditioned symbols, flags, dollar signs, job titles, brand names, party affiliations and the like, is the level that most people, including psychiatrists regard as reality; they don't know the half of it.

The first benefit was the simple recognition that there are realms of experience, modes of self, and states of consciousness far beyond the ken of our day-to-day experience or our traditional cultural and psychological models.

The form of spirituality I am referring to is fully compatible with any level of intelligence, education, and specific knowledge of the information amassed by such disciplines as physics, biology, medicine, and psychology.

The importance and value of transpersonal experiences is extraordinary. It is a great irony and one of the paradoxes of modern science that phenomena with a therapeutic potential transcending what Western psychiatry has to offer are, by and large, seen as pathological.

The prevailing attitude in traditional psychiatry and among the general public is that any deviation from the ordinary perception and understanding of reality are pathological. (What idiocy!)

The process of serial LSD sessions transcends the framework of traditional depth-psychological analysis and offers unique possibilities for a serious philosophical and spiritual quest.

There are dedicated scientists trying to find some way in which supplies of LSD may be made available for important research in brain physiology, psychology, theology or mental therapy.

This century, the scientific understanding of reality has undergone dramatic changes, but traditional psychologists and psychiatrists have not yet accepted the inevitable consequences for their disciplines.

This new psychedelic style has produced not only a new rhythm in modern music, but a new decor for our discotheques, a new form of film making, a new kinetic visual art, a new literature and has begun to revise our philosophic and psychological thinking.

Those psychiatrists and psychotherapists who had taken the obvious preliminary step of trying the new chemical themselves, soon began to pursue different objectives from their psychosis-oriented colleagues.

Those who uphold the impoverished sense of reality sanctioned by official psychiatry describe this type of awareness as “depersonalization,” “loss of ego-boundary” or “regression to the oceanic feeling,” all of which are derogatory terms.

Unusual states of consciousness, similar to those produced by LSD, occur spontaneously in many dying individuals for reasons of a physiological, biochemical, and psychological nature.

When they observe mystical reactions, psychiatrists employ the labels of pathology. Psychiatrists are hung up on psychosis and think that LSD causes normal people to act like psychotics.

Words such as joy, ecstasy, grace, beauty, just don't exist in the psychiatric vocabulary. The poor psychiatrist has been given the sad task of looking for pathology and is usually bewildered when he comes face-to-face with the more meaningful experiences of life.

Academic psychology is concerned with conditioning humans to accept what Freud called the “reality principle,” implying that only the artificial, conditioned games of the current social order are real; that natural pleasure is somehow a hallucination, even a psychotic outburst.

As prime conditioner of his fellow men, the psychologist or educator must be an exemplar—calm, serious, controlled, sensibly cynical, smugly pessimistic and above all, rational. To study the unconditioned state, to produce pleasure in his subjects and to act in a natural, hedonic manner would lead to his excommunication.

If one were a genuine psychiatrist and heard that something made it possible to open the mind and get into one's own unconscious, enabling examination of one's own shadow material and unconscious values, goals, anger, pain, guilt and so on, my God, wouldn't they be interested? One might be skeptical, but how could you not be interested?

If properly handled, a psychedelic crisis has great positive potential and can result in a profound personality transformation. Conversely, an insensitive and ignorant approach can cause psychological damage and lead to chronic psychotic states and years of psychiatric hospitalization.

In spite of the frequency of these phenomena and their obvious relevance for many areas of human life, surprisingly few serious attempts have been made in the past to incorporate them into the theory and practice of contemporary psychiatry and psychology.

In view of the enormous variety and scope of these phenomena, most of which lie far beyond the conceptual framework of traditional psychology and the philosophy of Western science, it is not surprising that Western scientists and educated laypersons alike tend to take these claims with a grain of salt.

Introducing transpersonal experiences into psychology creates a conceptual bridge between Western science and perennial philosophy. It also throws new light on many problems in history, anthropology, sociology, psychology, psychiatry, philosophy, and comparative religion.

Lama Govinda says that to Tibetans, the attempts of modern psychologists, who try to “prove” extrasensory perception by scientific methods, would appear crude and

laughable: one might as well try to prove the existence of light which is visible to all but the blind.

Large numbers of professionals have had the chance to experience transpersonal phenomena in their own training sessions and have recognized their unusual and specific nature. This set of data was one of the major heuristic streams that converged into transpersonal psychology as a new and separate discipline.

Mainstream psychiatry and psychology in general make no distinction between mysticism and mental illness. These fields do not officially recognize that the great spiritual traditions that have been involved in the systematic study of human consciousness for millennia have anything to offer.

Mainstream psychiatry and psychology in general make no distinction between mysticism and psychopathology. There is no official recognition that the great spiritual traditions that have been involved in the systematic study of consciousness for centuries have anything to offer to our understanding of the psyche and of human nature.

Many leading humanistic psychologists exhibited a growing interest in a variety of previously neglected areas and topics of psychology, such as mystical experiences, transcendence, ecstasy, cosmic consciousness, theory and practice of meditation, or interindividual and interspecies synergy.

Professional as well as public tradition has omitted serious consideration of creativity, religious development and problem solving during reveries, daydreaming or other unusual conscious states. In fact, there is a basic disinterest in the fields of psychiatry and psychology as regards the entire topic of consciousness.

Psychology, man's view of his nature, is always the last to adapt to a new world view. From the standpoint of established values, the psychedelic process is dangerous and insane—a deliberate psychotization, a suicidal undoing of the equilibrium man should be striving for.

Researchers who have seriously studied and/or experienced these fascinating phenomena realize that the attempts of traditional psychiatry to dismiss them as irrelevant products of imagination or as erratic fantasmagoria generated by pathological processes in the brain, are superficial and inadequate.

The aim of the psychiatrist is to teach the (statistically) abnormal to adjust themselves to the behavior of the (statistically) normal. The aim of the educator in spiritual insight is to teach the (statistically) normal that they are in fact insane and should do something about it. (That was Aldous Huxley.)

The entire range of pleasurable experiences has gone unstudied, unlabeled, undefined. You will not find the word "fun" in the index of most psychology texts. Indeed, until the psychedelic movement, unconditioned behavior and unconditioned experience were considered ipso facto schizophrenic.

The exploration of ways of expanding human consciousness will occupy a prominent position in the mainstream of contemporary psychology. We can look forward to a far more extensive application of these powerful agents as a means of facilitating social as well as individual potentialities.

The individual identifies with only one aspect of his or her being, the physical body and the ego. This false identification leads to an inauthentic, unhealthy and unfulfilling way of life, and contributes to the development of emotional and psychosomatic disorders of psychological origin.

The therapeutic results transcended anything I had ever witnessed. Difficult symptoms that had resisted months and even years of conventional treatment often disappeared after experiences such as psychological death and rebirth, feelings of cosmic unity and sequences that clients described as past-life memories.

Theoretical speculations in Western academic psychology and psychiatry are based exclusively on experiences and observations made in the ordinary states of consciousness. The evidence from the study of non-ordinary states of any kind are systematically ignored or pathologized.

Transpersonal psychology and the mystical world-view are frequently and erroneously referred to as unscientific. This reflects the fact that psychology and psychiatry, as well as the general public, still adhere to the old model of the world, based on the Newtonian image of the universe and the Cartesian dichotomy between mind and matter.

Under appropriate conditions the psychedelics could considerably speed and facilitate the process of working through psychological blocks. Material inaccessible in an ordinary state could be brought into awareness, sometimes producing dramatic transformations including death/rebirth experiences and alleviation of symptoms.

We now consider that they give us therapeutic possibilities in areas where we were formerly powerless. In fact these drugs are of such great importance in our psychiatric instrumentation that we can hardly think of doing without them. Indeed, this is a great step forward in psychiatry.

We were on our own. Western psychological literature had almost no guides, no maps, no texts that even recognized the existence of altered states. We had no rituals, traditions or comforting routines to fall back on. We avoided the sick-man atmosphere of the hospital. (That was Timothy Leary.)

When the shell of the ego has been cracked and there begins to be a consciousness of the subliminal and psychological otherness underlying personality, it sometimes happens that we catch a glimpse, fleeting but apocalyptic, of that Otherness, which is the Ground of all being.

While these new territories have not yet been recognized by Western academic psychiatry, they are not, by any means, unknown to humanity. On the contrary, they have been systematically studied and held in high esteem by ancient and pre-industrial cultures since the dawn of human history.

Words like hallucination and psychosis were loaded; they implied negative states of mind. The psychiatric jargon reflected a pathological orientation, whereas a truly objective science would not impose value judgments on chemicals that produced unusual or altered states of consciousness.

You've never seen a cell. What do you think of that? Yet it's the key to everything that happens to a living creature. I'm simply saying the same thing from the mental,

psychological standpoint, that there are wisdoms, lawful units inside the nervous system, invisible to the symbolic mind, which determine almost everything.

According to Laing, psychiatrists do not pay proper attention to the inner experience of psychotics, because they see them as pathological and incomprehensible. However, careful observation and study show that these experiences have profound meaning and that the psychotic process can be healing. Laing believes that psychotics have in many respects more to teach psychiatrists than psychiatrists do their patients.

As an educational psychologist, I'm interested in the implications of LSD research for the study of human learning and further human development. Through the LSD experiences I have learned to look at myself and society in a new way. These experiences have been, in effect, an additional higher education for me, equal in impact, effort, knowledge, beauty, and scope to obtaining a doctorate at Stanford.

Both Freud and Skinner explained creative processes in terms of their deviance from "normality" rather than as positive, healthy processes to be encouraged and developed. It is not surprising that most American psychiatrists and psychologists are baffled by the reports of LSD activity, puzzled by the subjective reports of LSD users, and skeptical about the value of LSD in man's efforts to understand, describe and change his behavior.

Changes in point of view cannot happen overnight, for they require acceptance of painful truths: that children daydreaming in class, for example, might be using their minds much more profitably than children paying attention; that psychotic patients may be in a better position to understand and experience reality than the psychiatric authorities who dose them with tranquilizers.

Detailed study of psychedelic phenomena would require a long-term systematic team cooperation of experts from diverse disciplines, such as psychology, psychiatry, neurophysiology, neuropharmacology, ethno-botany, modern physics, zoology, ethology, genetics, internal medicine, obstetrics and gynecology, anthropology, history of art, theology, philosophy and comparative study of religion and mythology.

Exploration of the human psyche with these powerful catalyzing agents has shown beyond any doubt that the biographical model developed by Freud's "depth" psychology barely scratches the surface of mental dynamics. To account for all the extraordinary experiences and observations in psychedelic states, it was necessary to develop a vastly expanded cartography of the human mind.

Exploration of the potential of these substances for the study of schizophrenia, for didactic purposes, for a deeper understanding of art and religion, for personality diagnostics and the therapy of emotional disorders and for altering the experience of dying has been my major professional interest throughout these years and has consumed most of the time I have spent in psychiatric research. (That was Stanislav Grof.)

Hallucinogens are still criminal. The "food of the gods" is illegal. The keys to the doors of perception are against the law. Using LSD therapy with convicts, drug addicts, and alcoholics is illegal. The great therapeutic tool of LSD that was proven so effective in case after case of psychological maladjustment has been taken away from the doctors of the mind by the fundamentalist, fascist guardians of our public morality.

In the transpersonal domain, where psychological and spiritual growth are one, psychedelics appear to be powerful tools for the investigation of consciousness; they could enable us to expand our understanding of the human mind and the nature of creative consciousness. A willingness to question our assumptions and to keep an open mind with respect to potential benefits and potential hazards is essential.

In traditional psychiatry, mystical experiences of any kind are usually treated in the context of serious psychopathology; they are seen as indications of a psychotic process. In his comprehensive and careful study, Maslow was able to demonstrate that persons who had spontaneous “peak” experiences frequently benefited from them and showed a distinct trend toward “self- realization” or “self-actualization.”

Leary had always talked about the deadening effect of the “adjust or else” brand of psychology that had held sway over the 1950’s, but he hadn’t realized just how dead in the water most of his colleagues were until he offered them psilocybin and they refused to try it. My God, these were psychologists yet they lacked the slightest curiosity about their own unconscious!

Leary was joined by assistant professor Richard Alpert, a hearty band of graduate students, and a constant stream of many of the leading intellectuals and artists of that time. Leary and his team employed new methods in psychological research by using themselves as subjects, reporting directly the drugs’ effects on their own minds. Sometimes they would take psilocybin with their students. This was unheard of.

Let’s come on as psychologists and develop a research project that aims at producing the ecstatic moment. Develop a science of ecstasies. Train graduate students to illuminate themselves and others. We have statisticians who systemize the static—how about estatisticians who systemize the ecstatic? (That was Timothy Leary talking to an associate at Harvard.)

LSD is a unique and powerful tool for the exploration of the human mind and human nature. Psychedelic experiences mediate access to deep realms of the psyche that have not yet been discovered and acknowledged by mainstream psychology and psychiatry. They also reveal new possibilities and mechanisms of therapeutic change and personality transformation.

Many psychiatrists, even though they talk constantly of the unconscious mind and are always speculating on the unconscious thoughts of their patients, appear to know this part of the mind only as an intellectual construct and not as a direct experience. Furthermore, many of them appear to be quite frightened of patients who actually live in their unconscious minds, particularly if patients have made this contact by using drugs.

Most of our colleagues in the psychology department couldn’t take the brain-change work seriously. They couldn’t admit that our new subject matter even existed. Altered states of consciousness simply didn’t exist as a category in the psychology of that time. It was the familiar tunnel vision that has always narrowed the academic mind. (That was Timothy Leary at Harvard.)

Opposing terms like psychosis vs. revelation, hallucination vs. vision, regression vs. mystical insight, and sensory distortion vs. sensory enhancement embodied two different attitudes toward the experience and even suggested two different world views.

Psychedelic drug users thought that the words of psychiatry and medicine were being used as a weapon against them.

Psychiatrists use their diagnostic jargon of mental pathology for states of consciousness which many of them have never even bothered to experience. (They are no more enlightened than the theologians who refused to look into Galileo's telescope claiming that they already knew how the universe is ordered and that if the telescope showed anything different, it would be the doings of the Devil.)

Reports created a witch-hunting response from parents, teachers, ministers, police authorities and legislators. Unfortunately, many mental-health professionals participated to some extent in this irrational approach; although the reports of two decades of scientific experimentation with LSD were available in the psychiatric and psychological literature, they allowed their image of this drug to be formented by newspaper headlines.

So many practitioners of the inexact sciences (e.g., psychology, anthropology, sociology) let it be known most clearly that they already know what reality is and therefore what sanity is. For these poor drudges reality is the world of nonpoetry in accordance with the great Western myth that all nature outside the human skin is a stupid and unfeeling mechanism.

Specialists from various disciplines have asked me for specific details of my observations, because they felt that these data may have important implications for such diverse areas as personality theory, psychology of religion, psychotherapy, genetics, psychology and psychopathology of art, anthropology, the study of mythology, education, psychosomatic medicine and obstetric practice. (That was Stanislav Grof.)

The experience from LSD therapy and the new experiential psychotherapies clearly indicates that exposure to another person's deep emotional material tends to shatter psychological defenses and to activate corresponding areas in the unconscious of the persons assisting and witnessing the process, unless they have confronted and worked through these levels in themselves.

The experience must come from the drug itself and the training must be specialized. No present medical or psychological degree qualifies for the job. (A medical or psychological degree doesn't qualify someone to be an airplane pilot and nothing qualifies someone to be an LSD guide if they don't have direct, personal tripping experience with LSD.)

The new data are of such far-reaching relevance that they could revolutionize our understanding of the human psyche. Some of the observations transcend in their significance the framework of psychology and psychiatry and represent a serious challenge to the current Newtonian-Cartesian paradigm of Western science. They could change drastically our image of human nature, of culture and history, and of reality.

The recognition of the primary and independent significance of spiritual aspects of the psyche or of what would these days be called the transpersonal dimension, was extremely rare among Freud's followers. Only Jung was able to penetrate really deeply into the transpersonal domain and formulate a system of psychology radically different from any of Freud's followers.

To interpret the visionary experience laymen use the language of ecstasy and psychiatrists use the language which is familiar and natural to them, the dialog of diagnosis. Now the curious thing about psychiatric language is that it's almost completely negative, a pompous, gloomy lexicon of troubles, symptoms, abnormalities, eccentricities.

Transpersonal psychology has emerged as that branch of psychology specifically concerned with the study of human consciousness. It attempts to expand the field of psychological inquiry to include such human experiences as those induced by psychedelics, as well as similar states attained through the practice of meditation or other disciplines.

Western scientists view their own particular approach to reality and psychological phenomena as superior and "proven beyond a shadow of doubt," while judging the perspectives of other cultures as inferior, naive, and primitive. The traditional academic approach takes into consideration only those observations and experiences that are mediated by the five senses in an ordinary state of consciousness.

What is needed is the clear voice of people who have no stake in disguising the truth. The young must be taught to distinguish between psychedelics, which hold out the promise of religious experience and of self-transcendence, and destructive drugs like cocaine, amphetamines, heroin, crack. They must be taught to respect the psychedelics and to be ready spiritually and psychologically before they attempt to take them.

When we set out to study consciousness and such elusive altered states as ecstasy, there is the observer's "subject matter" and there is the subject's "reality" and usually these have no relation. The psychiatrist may see psychosis, while the subject may be experiencing hedonic ecstasy. The outside observer has an entirely different view from the experiencing person. (The psychiatrist must be experienced with LSD or it's a joke.)

You have to take it with your patient or at least have taken it yourself in order to empathize with and follow him as he goes from one level to another. If the therapist has never taken it, he's sitting there with his sticky molasses Freudian psychiatric chessboard attempting to explain experiences that are far beyond the narrow limits of that particular system.

Forgotten in the later hysteria of the 1960's was the exquisite design of the early Harvard experiments. Rarely in the short history of psychology was such elegant, complex, socially influential research conducted! At the same time that the CIA was furtively dosing unwitting Harvard students for the purposes of control and destruction, we were operating with the books wide open. No secrets. Total collaboration. (That was Timothy Leary.)

I had psychological data, thousands of test scores and numerical indices which demonstrated with precision why psychotherapy did not work. Each laborious calculation was proving that psychology was just a mind-game, an eccentric head trip on the part of the psychologists and that psychotherapy was an arduous, expensive, ineffective, unimaginative attempt to impose the mind of the doctor on the mind of the patient. (That's Timothy Leary.)

Psychiatrists should listen to what their patients say about drug experiences; patients often know more about the workings of the unconscious mind from direct experience than doctors do from their intellects. Teachers should try to learn from students who know more about the subject than they do. In these ways, we will come to have better information than what we now get from experts who do not know what they are talking about.

The thing that most aroused my interest was the tone and contents of what my classmates who had taken the drug were saying. They talked to each other in stunned, excited voices about love, sharing, identity, unity, death, ecstasy—topics not generally discussed by psychology students except with cynical flippancy or heavy academic seriousness—but certainly never from experienced confrontation, as was happening now. (That was Ralph Metzner.)

The old paradigms of in psychiatry have now outlived their usefulness and are impeding progress. Instead of repressing observations because they do not conform to established ways of thinking, we should try to formulate new paradigms. A paradigm should not be confused with an accurate description of reality. It is a useful organization of existing data, a temporary conceptual tool that should be replaced when it no longer serves its purpose.

When subjects were given a psychedelic drug without knowing what to expect or how to respond, being left alone in a dark room or threatened by unfamiliar researchers demanding cooperation in psychological testing, it is easy to understand why so many experiences became psychotic. If nonpsychotic experiences are desired, subjects must be prepared, feel secure in a friendly environment, and above be willing and able to trust in a reality greater than themselves.

A productive session usually involved total psychological surrender to the experience. I can now understand the psychology of divine inspiration or of magical thinking. Institutional psychiatrists are really the consciousness police. LSD is the electron microscope of psychology. Psychological labels have been put on all great prophets and sages. Psychology textbooks have no chapters on fun and gaiety. Respect the psychological space of the experient. Research in the psychology of religion could utilize such drugs. What will the neighbors think is the beginning and end of modern psychology. When the mind is stilled, psychological time ceases to exist.

In a psychological sense, it was almost as if I were married for the first time in my life during the session.

The psychological power of his new spiritual vision was so great that it helped him overcome his excessive fear of death.

They felt that the experience had improved their capacity to deal with their problems and had enormously stimulated their psychological growth.

I had the feeling that I knew what the purpose and the reason for life was. The feelings that I had at the time could not be very well described in psychiatric terms but best described in either religious or poetic ones.

Subjects responded by becoming deeply absorbed in this “new world” of altered perceptions—often to the point of forgetting altogether their early concern with psychological categories and labeling phenomena in terms of pathologies.

The nonordinary state of consciousness had the remarkable capacity to select and bring into conscious awareness contents that have a strong emotional charge and are thus psychologically important.

The psychiatrist asserts it is “fact” that the subject sat in a catatonic state for two hours, refusing to talk; the subject knows the “truth” to be that he was spinning far out of space-time into an ecstatic dance of neurons which made words inadequate and irrelevant.

a path which could lead to deep levels of psychological-spiritual growth or true enlightenment

an atmosphere of psychological freedom; of permissiveness to think, to feel, to be whatever is discovered within oneself.

many mechanisms of therapeutic change that are entirely new and have not yet been discovered and acknowledged by traditional psychiatry

new and powerful mechanisms of healing and personality transformation that are now available in traditional psychiatry and psychotherapy

providing insights into the psychology of creation by supplying a new way to read the forgotten languages of the mind, a highway to the unconscious

psychiatrists whose proprietary claim to a revealed understanding of the mind and whose antagonism to consciousness expansion are well known

sequences of psychological death and rebirth, encounters with archetypal beings, visits to mythological realms of various cultures (eyes closed)

the confused epoch of modern psychiatry where there was no place for the extraordinary or the divine

the irrationality that pervades much psychiatric thinking about drugs and altered states of consciousness

the need to acknowledge the wisdom of ancient and Oriental spiritual disciplines and assimilate it into psychology and psychiatry

the new worldview emerging in Western science, the new thinking in psychology, a new image of the psyche

the potential of psychedelic therapy in the treatment of various psychiatric problems and in the training of mental health professionals

the potentials—social, creative, psychological, cultural and ontological—which may be experienced by means of the consciousness-expansion drugs

the rejection of classic spiritual and mystical experiences as symptoms of mental illness by modern science and psychiatry

the view that science as a branch of human endeavor is socially and psychologically conditioned just as any other human activity

to expand the consciousness by reducing or eliminating the psychological defenses that separate the world of the supernatural from the world of everyday reality

to move experientially from a personal, psychologically-oriented frame of reference into a wider, spiritual one

to talk about the mystic experience simultaneously in terms of theology, psychology and biochemistry

mainstream psychiatric literature suggesting that direct spiritual and mystical experiences in the lives of the great prophets, saints and founders of religions were actually manifestations of mental diseases

providing new insights into the psychology of creation by intensifying and lengthening the subjective duration of the kind of subtle mental activity in which original productions begin and new meanings are created

the deliberately inculcated conservatism of the psychiatric-medical mind, brainwashed through many years of arduous academic training to perceive any change in functioning as pathological

the psychological implications of the psychedelic experience, the accelerated personality change, the rapid learning, the sudden life changes so regularly reported by psychedelic researchers

a psychological cleansing

a psychological educational tool

a sudden flash of psychological lightning

a transcendental experience accompanied by intense psychological reactions

a vision of higher reality such as comes in moments of scientific or psychological insight

a voyage much richer in scope and meaning than any Western psychological theory

aesthetic, emotional, psychological, physiological and biochemical effects of music

brave and hearty sailors of the psychological sea

can be used for extraordinary psychiatric explorations

children of affluence and leisure who were homeless psychologically

extraordinary physiological and psychological effects

far transcending the narrow confines of psychiatry, psychology and psychotherapy

feelings of spiritual, physical and psychological benefit

important psychological, philosophical and spiritual dimensions

inadequate theologies based upon psychological ignorance

Leary and Alpert a Sundance-Butch Cassidy alliance of psychological outlaws

LSD therapy which considerably deepens and intensifies all psychological processes

offers new therapeutic possibilities undreamed of by traditional psychiatry

our society's psychological inertia

"out there" in the psychological equivalent of a hitherto unexplored geographical region

overwhelming psychological effects

penetrating psychological insights

psychedelics for personal exploration and psychological growth

psychological arousal and alertness

"psychological empathy"—the psychical at-oneness with the object

psychological integration, illumination, self-transformation
psychological rape, patients in a nuthouse not told what drugs they're given
states of psychological awareness
states of spiritual conversion, interpersonal closeness and psychological insight
the anti-psychology movement associated with R. D. Laing
the experience of psychological death
the extraordinary value of LSD for the education of psychiatrists and psychologists
the pomposity of psychiatrists
the process of psychological transformation and spiritual opening
the psychological creatures inhabiting the remote regions of our minds
the psychology of religion
the relevance of mythology for psychology, religion and human life
these emerging social and psychological tools
unlocking doors to my own psychological makeup
unusual sensitivity to various psychological factors