

LEVEL FOUR OF THE

Healing Journey

*Becoming
Authentic*

Workbook

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Introduction

We are not human beings having a spiritual experience but spiritual beings having a human experience.

—PIERRE TEILHARD DE CHARDIN
French mystic and philosopher

This workbook follows the three levels of the Healing Journey core program. In Level 1, “Coping with Cancer Stress,” the emphasis was on regaining some control by learning some basic strategies for managing the mind. This work was continued and extended in Level 2, “Skills for Healing,” where some more introspective work was also introduced, designed to help us better understand how we function psychologically. Level 3, “Steps to Spiritual Healing,” was a more detailed introduction to spirituality and an examination of the major blocks” or mental obstacles that stand in the way of spiritual experience.

“Becoming Authentic” is Level 4 of the Healing Journey course and is intended for the dedicated student who wishes to consolidate the skills learned at previous levels. At this stage we have already gained some sense of control and some clarity on what is important in our lives. We are now ready for the next and ultimate phase of healing. This involves, as the wisdom traditions of many cultures have pointed out, the discovery or uncovering of our true nature or identity.

Learning who we are—spiritual beings having a human experience—is simple enough in principle, although difficult in practice for most of us. It is difficult because finding the Self (and the capital S is commonly used to distinguish true from imagined self), requires letting go of our ideas of who we are, established in our personal lifetime and heavily reinforced by the prevailing culture. A lifetime of conditioning has created the sense that the material world, including our separate bodies, is our ultimate reality, whereas the mystics tell us that the world of matter, including our bodies, is only a partial, even illusory, “reality.” Our true being resides in an underlying Divine Ground or spiritual reality, of which we all form a part. (This is discussed further in our Level 3 workbook, and in my *Bringing Spirituality into Your Healing Journey*, one of many books on the subject).

Why would we bother to contact this underlying substrate of our being? Many will not wish to, feeling content with a purely materialistic life. But for those who do realize their spiritual nature, there are many “benefits”; I put this in quotation marks to indicate that it is not really a question of “benefits” in the worldly sense, but rather a matter of growing up, maturing as a child who grows into an adult. Spiritual realization brings the awareness, the knowing, that death is not the end, that we are not all separate beings but part of a whole, and that our body is a kind of vehicle that we adopt for awhile and lay down as it wears out. This felt understanding brings changes in the perceived purpose of life, which is now less about seeking sensory pleasure or control and more about understanding, connecting with the Divine, and helping others. Will identifying with this Deeper or Higher Self heal the body? A very evolved individual would probably say that this becomes irrelevant, given the eternal nature of spirit, but for those of us struggling on the path, hanging onto a functional body remains important! Our increasing clarity and awareness will certainly enable us to make more informed choices; living longer, or healing from serious disease may depend on finding definite goals for our lives that are important and fulfilling, particularly goals that involve further growth and assisting others.

This course is designed to point us firmly in the direction of this final phase of our healing journey. I have set it out as a sequence of ten assignments or projects. Each requires a great deal of reflection, meditation, and writing, in order to secure a deeply felt understanding of the concepts. Keep the topic in mind for a week or more, watching yourself as

you go about daily activities. There are two aspects to each project, which we might call “emptying” and “filling.” The emptying is examining ideas and behaviours that we need to let go of, and recognizing the fears that tend to stop us from doing so. The filling is finding out what to put in place of the old concepts.

We have learned, in Levels 1 to 3, many techniques or tools to use in this process:

- Relaxation
- Mind watching and thought management
- Goal setting
- Mental imaging and drawing
- Reflection
- Journaling
- Meditation (several kinds)
- Using affirmations and mantra
- Consulting an Inner Healer
- Dropping resentments
- Reading spiritual texts
- Discussing with others
- Prayer (meditation on a text)
- Chanting
- The Divine Light exercise

It would be valuable to review all of these techniques and to practise any that have become a little “rusty,” so that you can apply them as needed to our new assignments. We will also be considering, in this course, how to “seek guidance” (an extension of the Inner Healer idea) and how to use symbols more deliberately.

It is important to recognize that what we aim to give up is not the material world, our families, our bodies, but our *attachment* to these ideas. And that in turn does not mean ceasing to love and care for others or for our earthly selves. As the mystics tell us, and as I can confirm from my own small experience, when the spiritual connection becomes more central in our lives, we are freed up to love much more. We experience much more peace and joy in the midst of everyday sights and activities. What diminishes is the emotional neediness or craving for sensory stimulation, for control, for rewards in the form of money or overt respect. For a few spiritual geniuses, the journey is completed rapidly; for most of us, it will be a lifetime endeavour, but if we are sincere we will make

progress and enjoy enormous improvements in the quality of our mental and physical lives.

Working at the Spiritual Level

The spiritual view, as explained by many enlightened people (saints, sages, mystics) across the centuries and across cultures and religions, is that we are not fundamentally material beings at all: we are non-material spiritual beings. We have chosen to identify with our bodies, and therefore think that we are at the mercy of our biology, and that death is the end. However, the option remains to reconsider our identity, to learn, by direct experience, that we are in fact non-material. Another way to say this is that there is a part of us that is immortal, not subject to biology and death. Becoming spiritually connected seems to promote healing of the body, although this is not invariably the case. What is certain is that achieving spiritual awareness brings peace of mind and ultimately a more peaceful passing. We can make a deliberate choice between these two options:

- I am a simple, biological animal, driven by my body chemistry only, or
- I am a spiritual being, part of the Divine, not bound by time; I appear to be inhabiting a body at present, but I am not defined by it.

We can become aware of our spiritual nature by remaining open-minded and using the wide range of spiritual techniques and written material that have been handed down to us. The work takes place in our minds—it involves an honest, no-holds-barred examination of all of our opinions and habits, followed by dedicated work to replace patterns that are harmful or obstructive with other patterns that will foster spiritual connectedness. Some of the main ideas:

1. Healing is a state of mind; our aim is to achieve the healing state. (Body healing may follow.)
2. What is this state of mind?
 - The felt sense is of love, joy, connection with all.
 - The understanding is of one's true nature, of oneness with all, with the Divine Ground.
 - The attitude needed is an openness to new ideas and practices, excitement about the learning and change, commitment, dedicated regular practices, confidence in oneself

- and the value of the work, and acceptance of whatever happens.
3. Moving towards the healed/healing state requires two steps.
 - a. Removing blocks (see following table for specifics)
 - Understanding: examining and changing old ideas; reading, reflecting
 - Changing thought patterns—removing constant harmful thinking
 - b. Adopting spiritual habits that foster the connectedness
 - Mental quiet, present-centredness, non-reaction
 - Awareness of thoughts and feelings at all times
 - “Consulting”: seeking spiritual guidance, as often as possible (in place of personal control)
 - Cultivating devotion, gratitude, humility
 - Using affirmations, imagery, mantra

How This Course Is Organized

We will be focusing on achieving a state of mind, a healed state, that is commonly displayed by people who have greatly outlived their prognoses. The main sources of information here are:

- Our own clinical experience over more than twenty years
- Similar experience by other clinicians
- Our research (the Healing Journey project on long survival, and interviews with long survivors)
- The literature describing the qualities of long survivors

We have found, in common with other authors, that people who survive much longer than expected (and sometimes heal completely) nearly always exhibit the three main qualities listed below (the words are mine, but our own research and that of others is in good agreement):

1. *Authenticity*: according to the *Oxford English Dictionary*, this means “the quality of being true in substance, genuine, being real, actual.” This translates psychologically into the habit of listening to a true inner voice, which represents our real wishes and needs. To paraphrase a Buddhist way of speaking, we could call this “right guidance.”
2. *Autonomy*: again, according to the *OED*, it means “conforming to (one’s) own laws only, independent.” Psychologically speaking, it means acting on that “true inner voice,” rather than being tossed

Specific Practices for Spiritual Growth

Level of mind	Desired state	Methods
Sensations	Awareness and control of mind–body connections	Body care Inner body awareness Yoga, etc.
Intellect/ideas	Understanding of spirituality	Reading, reflection, journaling Meetings with fellow-travellers
Stream of thoughts	Awareness and quiet	Mind-watching and quietening: meditation, mantra, silence Practice of non-reaction, acceptance Practice of being in the Now Affirmations, mantra, etc.
Deeper feelings	Love, devotion, oneness	Communion Prayer Devotion, gratitude, trust Focus on particular avatars, like Christ, the Buddha, Divine Mother
Contact with inner wisdom	Being guided by Higher (not lower) Self	“Consulting,” in meditation, etc. Using imagery (e.g., Inner Healer) Dreams
Tailoring life to healing	Constant communion with the Divine Source	Making healing practices the central focus Using ritual, e.g., prayer, chanting, symbols such as statues and pictures Service to others

around by ideas of what we “should” do or be like. A concise way of putting this, again in Buddhist terms, would be making “right choices.”

3. *Acceptance*: the quality of not reacting defensively against other people and our environment, but instead being tolerant, loving, understanding—recall the prayer of St. Francis from Level 3 (worth learning, if you haven’t already done so). In effect this means “right action,” from the Buddhist perspective.

You will notice that these three major qualities all begin with the letter A! We can think of our work as the “triple-A approach to healing”! In an appendix you will find chapter 6 from my book *Can the Mind Heal Cancer* (2005), which provides more documentation on interviews with “remarkable survivors” who have been through the Healing Journey program. Perhaps the best overall term for what we are trying to achieve is *authenticity*, becoming “who we really are” or are meant to be. In spiritual terms, this means uncovering the spiritual or divine Self underneath all the agendas of the ego, which derive largely from fear, as we discussed in Level 3. However, even if the spiritual concepts do not appeal to you, you can work at becoming more authentic purely at the psychological level; as you will see from the appendix, many of our interviewees were content simply to “live the way I want to live,” without professing any lofty spiritual motives, although there was usually a sense of connectedness to some higher order or meaning in their thinking.

The three terms—*authenticity*, *autonomy*, and *acceptance*—are inter-related and overlapping, of course (see figure 1). As we learn to listen to a true source of guidance from within (in spiritual terms, our Higher Self, in secular terms, our intuition), we will be equipped to make better choices and display more autonomy. And as we reclaim our own “inheritance,” so to speak, we will find ourselves becoming much more tolerant of others. Each quality feeds back into the others. The whole process leads to a “healed state,” characterized by peace, joy, love, and a sense of meaning in life and beyond.

You will find that there are ten assignments—three designed to strengthen each of the three qualities we have been discussing, and a final assignment (writing a life story) that draws on all of them. As with all of this work, what you get out of it depends on what you put into it. Intensity is key here! Each assignment has several parts, usually with some suggested reading or activities outside the course itself. There is a lot of

review, including repetition of techniques you have learned earlier in the course. Each time you do an assignment exercise, try to do it as if for the first time, with a fresh and open mind. Even with something as basic as thought watching, you can learn as much on the thousandth attempt as on the first. I would suggest spending one to two weeks on each assignment, but looking back at earlier ones as you progress—we don't just do one of these projects and consider the matter closed! They all deal with aspects of ourselves that we hope will evolve for the rest of our lives.

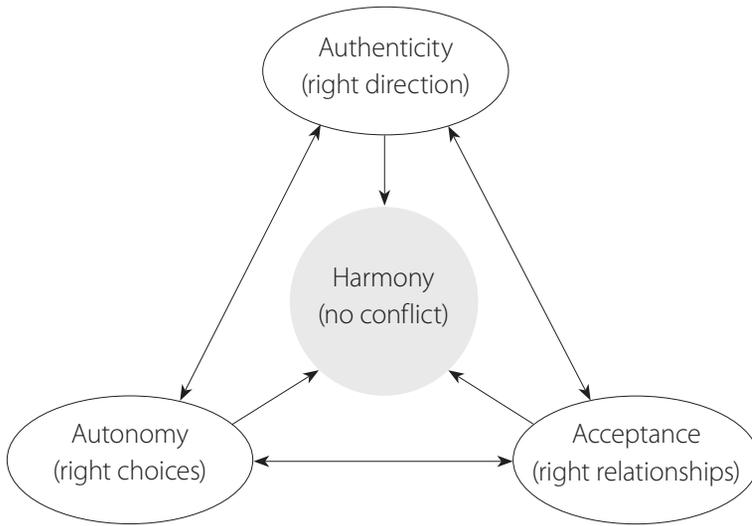


FIGURE 1. *The “triple A” approach to healing: Each quality feeds back into the others to create a healed state of peace and joy.*

Authenticity: Understanding and Controlling the Mind

Review

- *Mindwatching exercises from all three previous levels*
- *Meditation techniques from Level 3*

As Easwaran says, “We become what we meditate on,” and he points out that this includes all the thoughts we entertain in our minds; elsewhere he writes of the mind being like a “sponge,” soaking up everything we offer it. The central, pre-eminent task of any personal and spiritual growth is to learn to observe and control what we allow into our minds.

Most of us find that our thoughts are wildly uncontrolled at first (and even after years of trying to manage them!), but it is encouraging to note that even a small amount of awareness and control brings great benefits in terms of peace and healing. At least some of the mental noise must be cleared away before we can hope to contact an inner source of intuitive or spiritual guidance. Thus our first assignment is to pursue more intensely something that most will have done to some extent already (remember, intensity is key to all of this work).

1. Sit quietly with the eyes closed and observe your thoughts for at least ten minutes every day for a week or more. After doing this each time, write down all you can recall of the main themes,

sensations, and ideas. As you progress, see if you can discern repeating patterns of mental behaviour. For example, I find that my first random thoughts are about immediate sensations and events, and once they have been eased aside, I start to go backwards, towards events of the preceding hours and days. The goal is to notice what the mind is doing. It can then be helpful to journal about the thoughts and feelings that emerge.

2. I hope you are practising a meditation technique at least once a day by now. You may wish to review some of the methods we learned in Level 3, or you may already have a technique that satisfies you. Write about your experiences in meditation over the next one or two weeks.
3. If you find yourself skipping practices, analyze why this might be happening and write about the thoughts (it will be your thoughts, primarily, that cause you to do this).
4. To enhance our spiritual experience in meditation (and in life generally) we can do several things:
 - Have a space set aside for meditation only.
 - Set up an altar, with meaningful symbols on it. You can hang pictures on the wall and put statues of spiritual avatars around the house.
 - Use rituals, like lighting a candle at the start of meditation.
 - Try sitting on a cushion on the ground instead of on a chair.
 - Perhaps use incense (music is usually too distracting).
 - Do a preliminary relaxation before meditating.
 - Start with brief chanting—which can be extended if desired. We can also play tapes of chants in the house during the day, and as we go off to sleep at night.
 - Try writing a mantra, keeping the mind focused.
 - Try whispering a mantra or prayer.

Explore some of these approaches, and write about anything you discover.

Autonomy: Choosing to Do What I Find Truly Rewarding

Review

- *An ideal day in the future, from Level 1*
- *One week to live, from Level 2*

The single most constant finding from interviews of people who have greatly outlived their prognoses is this: these people say they have learned to live life the way they want to, rather than feeling constantly pushed about by obligations. The first step towards this kind of autonomy, or free choice, is to define what we want, what “turns us on.” If you haven’t already done so, it would be very helpful to read Lawrence LeShan’s valuable book *Cancer as a Turning Point*. In the back of the second edition there are twenty-nine exercises to help the reader define what he or she would find fulfilling in life. The following is an adaptation of the first exercise in this series.

1. List the activities that “turn you on,” that is, those things that make you feel more alert and alive, relaxed, at peace with the world, with a sense that life is interesting and worth living. Some examples resonate with most people: walking in beautiful natural surroundings; listening to the kind of music you like; being with someone you love; reading a book by a favourite author;

being by the sea; eating a good meal with friends; getting your hair done; pursuing your hobby; playing with your pet . . . the possibilities are endless and will differ for each person. Make your list, without reservation or fear that it might seem silly or trivial to other people. Think about things in the past as well as present activities.

2. Now, of course, we need to write a similar list of things that drag us down, that make us feel less alive, depressed, overwhelmed, fed up, burdened, bored, or disillusioned. We are not focusing on disease or medical problems here, but on the day-to-day or year to-year-activities that oppress us, that seem perhaps like duties or obligations, but do not reward us in any immediate way. Some likely examples: working out your income tax; watching trivial TV shows; talking to a particular acquaintance or family member; driving in traffic; thinking what to make for dinner; getting your computer fixed . . .
3. The next step, as LeShan indicates, is to look honestly at how much of your time, in recent months, you have spent doing things from list 1, and how much from list 2 (depressing, isn't it!)? Have you made any efforts to change towards doing what you want?
4. Why is it hard to change your life towards doing what you want? (I know, we all have responsibilities, etc.). LeShan suggests that in framing our answers here we avoid blaming other people or circumstances ("My family needs me to do that") and instead identify thoughts and feelings in ourselves that keep us stuck: "I would feel like a poor provider if I changed jobs and earned less; I believe it would be ridiculous for an adult to spend time at that; I'd feel guilty if I didn't . . ."

Now put all of this together, perhaps as lists of current versus desired activity patterns. Note the obstacles, in your own thinking, to making changes. Recall that to change your life towards what you truly want may be life-sparing. Then write about what you plan to do now.

Acceptance: Dropping Grievances

Review

- *The “garden gate” resentments exercise from Level 2*
- *Chapters on judgement, forgiveness, guilt, and projection in Level 3*

The major obstacle to spiritual experience is our habit of maintaining a sense that we are separate beings, little worlds unto ourselves, and as such, liable to constant frustration by the larger world that we place outside the small self. As you will have found in Level 3, we engage in a constant, internal, running commentary on how we feel about people and events around us. Most of this is negative in tone. In Level 3 we called this judgement; perhaps a better word is *grievance*, which unambiguously refers to our reactions to things we don't like.

This tendency to find grievances everywhere imprisons us in a little cloud of resentment, which we carry with us everywhere. In terms of the metaphor of mind that we have been using, constantly finding grievances is like remaining in the “swamp.” It keeps us away from the present moment, since resentments are about the past and possible future, and it prevents us from seeing and accepting things (including ourselves and other people) as they really are. Thus it effectively stops us from realizing our true nature, as part of the One Mind or Divine Source.

1. Make a list of your grievances.
 - Grievances about other people: what they have done, or done to you, what has seemed unfair, what about you has been neglected, avoided, unappreciated, overlooked?
 - Now the grievances about your life situation: where have you been limited by circumstances apparently beyond your control; what has been unfair or unfortunate, what has frustrated you? (This will obviously overlap with the preceding point)
 - Now any grievances about your health status: what seems unfair, frightening, limiting what you can do?
 - Small hassles: for a period of a few hours or more, watch closely for all the things that frustrate you, however small, e.g., not being able to find something immediately, any discomfort in the body, any unsatisfactory communication with someone, discontent with your surroundings, feelings of fatigue, etc., disruptions to your preferred schedules, and so on. Now write them down. What is your inner reaction to these things (what do you tell yourself)? Comment on the nature of your internal monologue generally.
 - What does the holding of grievances do to me—to my mood, thoughts, and feelings about health, to my relationship with the Divine Ground?
 - How can I drop all of this? Practise watching for grievances in your daily life, catching them before they fester into huge resentments. Try using imagery of the light to dissolve them. Tell yourself, “This was from my unaware phase—I no longer need it.” If you can imagine a divine figure or avatar, lay the resentments at his or her feet and ask that they be dissolved.
2. Now explore what you will allow into your mind in place of grievances.
 - Repeat the exercise in session 5 of Level 3: “Imagining yourself as totally secure and fulfilled, universally liked and respected by other people, and by God.” Note what this does to your need to express grievance against other people or situations.

- Meditate on the mantra (poem) of the Divine Light Invocation (Level 3, session 8).
3. *A Course in Miracles*
- If you haven't already become familiar with this book, now would be a good time to do so. It is not easy to read, but it is the most thoroughgoing work on healing that I have encountered. For many people, approaching *ACIM* through other writers is a helpful introduction. I can suggest the "Introduction to a Course in Miracles" (1987) or Marianne Williamson's *Return to Love* (1996). Here are some exercises to get you started.
- Read Lessons 68 and 69 from the Workbook (included in the *ACIM* volume, but easier to read than the main text), and comment on how they apply to you. If you wish, you can download these lessons from
www.acim.org/Lessons/Select/Text/Part1-2/Lesson068.htm
www.acim.org/Lessons/Select/Text/Part1-2/Lesson069.htm
 - Try an exercise adapted from Lesson 69 of *ACIM*. After relaxing deeply, imagine yourself surrounded by a dense cloud or fog of resentments and grievances. Now see yourself ascending slowly through this fog, gradually penetrating it. Find yourself on the higher slopes of your "mountain"; perhaps you can reach the peak and look around. See the cloud layer spread out all around, with occasional other peaks emerging from it. Experiment with flying around up there! Then slowly come down again, to ordinary life, but bringing the clearing and light with you. Imagine how daily affairs and other people look when viewed from this light space.

4

Authenticity: Listening to Our Authentic “Inner Voice”

Review

- *Do the Inner Healer exercise, from Level 2, a number of times, using the tape or CD if you wish.*

The major spiritual traditions all tell us that we have, inside, a True or Higher Self that becomes obscured by the raucous clamouring of the separate small self or ego. The ego voice is driven by urges for self-protection and sensory gratification; it uses projection (blaming), rationalization, and other defences to ensure its continuance. A person dedicated to self-healing needs to find the Self, the true voice behind this noise of the ego. How can we tell the difference? It is not so easy at first, but one good indication is that the ego's promptings are usually attended by considerable emotion, often negative (“you don't need to do that; she's trying to blame you; this is boring”). The voice of one's Higher Self, on the other hand, which may register as more of a “knowing” than something verbal, never has negativity attached; the only feeling associated with it is love and joy.

1. As exercises to clarify this for yourself, try the following, either sequentially, at one time, or at different times:
 - Sit and watch your mind for a few minutes. Think of things

you have to or want to do. What “voices” will guide your actions? Are there residues of childhood parent or other inappropriate sources there?

- Meditate for a few minutes. Look within. What is going on, apart from the inevitable threads of thought that come and go? Can you sense an underlying quiet? Is there any sense of “knowing” in that space?
 - Think of an important question or issue. Repeat it to yourself or write it down, then meditate, in the same way as you usually do, but with an underlying aim of finding some guidance.
 - Try reading a favourite spiritual text, having previously defined a question on which you want guidance, then meditate on this question.
2. Are there times when you just “know” what is needed, times when things simply flow, times when you feel more connected, more aware, more guided by an inner wisdom? Experiment with trying to consult this inner voice as you go about your daily tasks. What are the prerequisites for accessing it? Can you allow it to guide you? What interferes?
 3. Some people find that they can identify a number of voices inside themselves, and give them names. For example, the Critic, the Controller, the Lazy Procrastinator, the Scared Child, and so on. See if this works for you (you will need to look for these sub-personalities while meditating or relaxing deeply). Does your Higher Self have a name? Can you see images of these parts of your mind?

Write about all this. What does it tell you about the sources of guidance that would be real for you, and therefore capable of leading you to your healed/authentic Self?

Additional Exercise

This is an adaptation of the Divine Light Invocation, an imagery exercise and yoga practice that was taught by Swami Radha. This is the basis of the Light Imagery used at the end of the Healing Journey sessions. Practise it and then write about your experiences.

Either standing or sitting, imagine a beautiful beam of brilliant white light entering through the top of your head and flowing down all around

your body. You can then imagine how the light fills you up, filling you as if you were a jug or jar of bright white light.

You can then say to yourself the Divine Light Invocation:

I am created by Divine Light

I am sustained by Divine Light

I am protected by Divine Light

I am surrounded by Divine Light

I am ever growing into Divine Light

Let yourself feel the way the light suffuses you with healing energy, at all levels of your being: your body, your mind, your heart and your spirit.

You can then repeat the Invocation to yourself again, this time feeling the Light surround you as well as fill you. This Light can also be sent to others who may benefit from receiving Healing Light. As you repeat the Invocation, see the person in your mind’s eye, filling up with Light as well, helped and supported by Divine Light.

Then you can acknowledge to yourself,

*Every cell of this, my physical being, is filled with Divine Light. Every level consciousness is illumined with Divine Light. The Divine Light penetrates every single cell of my being, every level of consciousness. I have become a channel of pure Light. I am one with the Light. I am Light.**

* Obtain a copy of *The Divine Light Handbook* by Swami Radha. Try the full exercise as she describes it, and write.

Autonomy: What Do I Really Want in My Life?

Review

- *The exercise on an ideal day in the future, from Level 1. Do this exercise a number of times, using the tape or CD as needed, and write about it.*
-

This exercise builds on Assignment 2, but tries to go deeper. Do it after having sat in a meditative state for awhile. Don't try to "figure it out"—instead, let ideas and feelings come through to you.

1. What, in your heart, do you want most of all:
 - In terms of how you want to feel?
 - In terms of how you want to spend your time, day by day?Write about this, anything from a few lines to a page or more. Now go back into the meditative state and continue.
2. What obstacles or problems do you see in the way of achieving what you want in your heart? What stops you from getting it? Again, write about it.
3. Now, either through meditating or just thinking about it, what steps can you take to diminish the obstacles? What will you do right away? Write.

AUTONOMY: WHAT DO I REALLY WANT IN MY LIFE?

4. You could finish with a meditation or prayer of gratitude (for the insight) and request for help to align your life the way you want it.

Please repeat this a number of times. It is important to become very clear about what matters to you, what “turns you on,” even if it is interests or activities that were long ago discarded as impracticable. Let your “deeper mind” tell you, not the internal Critic that has obstructed us for most of our lives. If you like having a taped guide, the “Ideal Day in the Future” exercise is one way to do it.

Having achieved some clarity, do some rational/intellectual work to determine what obstacles are in the way of putting your plan into action. Then how to overcome them!

6

Acceptance: “Filling” Ourselves with Love, Operating from the Higher Self

The two statements of the title of this assignment mean the same thing. Much of our work to this point has been identifying and trying to drop obstacles to awareness of the Divine Ground—obstacles such as judgment, guilt, shame, old habits of self-protective thought and behaviour, lack of trust, and inattention generally. This is the “emptying” phase of the work. We also need a “filling” phase. This involves finding ways to replace the old separateness and self-protection with a new awareness—that we are spiritual beings who just happen to be here in this worldly dream. We need techniques, things to do, that constantly remind us of our true nature.

For this assignment I ask you to take the responsibility to find “filling” practices for yourself, to do them, and write about the effects they have on you. Here are some suggestions:

1. Find a mantra or affirmation that you can repeat during the day.
2. Make a recording, with your voice speaking or chanting on it. Then play it on your Walkman or iPod for a few hours a day. If you are making your own mantra recording, it can be helpful to use a loop that repeats every three or five minutes, so that you need only record for that length of time.

ACCEPTANCE: “FILLING” OURSELVES WITH LOVE

3. Or use a musical chant in the same way (on a regular tape, or CD, or MP3). Or just play it aloud through the day.
4. Or repeat a prayer (e.g., St. Francis).
5. A mala (rosary or beads) can be used in a similar way.
6. Try playing something inspiring (as above) on a pillow speaker (under your pillow) at night; if it is on a loop, it can run all night.
7. Another good practice is to set yourself something to remember to do for the whole day, upon waking in the morning, such as “non-reaction” for today, or “being in the Now.”
8. Attend at least one healing service in a church, temple, or synagogue around town, and write about it.

Additional Reading

Find some inspirational reading and study and write about it. Possibilities are books by Thich Naht Hahn, Easwaran, Yogananda, Pema Chodron, Swami Radha, Eckhart Tolle, one of the Christian mystics, Jewish sacred writings. Or at first you might find it easier to read some of the interpreters of spiritual ideas: Hugh Prather, Stephen Levine, Ram Dass, Charles Tart, Gary Zukav, Tom Harpur, Mathew Fox, Marianne Williamson, and many others. Read daily, reflect, and write.

If you feel ambitious, you could try *ACIM*, or the *Bhagavad Gita* (translations by Juan Mascaro or Eknath Easwaran are good).

Authenticity: Accepting Guidance

The spiritual traditions tell us that, to live a healed life, we need to cease being pulled around by our ego, which seeks only to protect and gratify itself, and instead accept guidance from a “higher” source. This Source is described in various ways in different traditions as God, the Atman, the Higher Self within, the Holy Spirit, the One, and so on. Our view of what the Divine is (and see session 1 of Level 3) will determine the way we think about it. But regardless, the practical issue remains the same: am I ready to allow myself to be guided by a deeper wisdom, accessible within myself? *A Course in Miracles* puts it bluntly: “Resign as your own director”!

A first reaction to such advice is to recoil at the suggestion—after we have lived a lifetime of self-centredness, and in a culture that exalts individual prerogative (“I did it my way”), the spiritual search requires that we hand over control? Our thoughts go immediately to what we think we might lose. So this is the first part of the exercise. What am I afraid I would lose if I tried to be guided by a Higher of Divine Power, or by my Higher Self?

In a first pass, examples would be control over my activities, the satisfaction of indulging myself with all kinds of little treats and comforts, protection from demands by others . . .

Second pass—deeper: my image of who I am, respect and cooperation from others, my ambitions in life . . .

Third pass—deeper still: my sense of being a separate self, my worth . . .

All of us need to ponder and meditate deeply on this for ourselves. If it's a new idea to you, the most important things to identify will be the immediate fears from imagining that you are asked to relinquish comfort and control.

Having identified the ego's reaction, now look at this possibility rationally and ask yourself,

- Would I, in fact, be deprived of much that is meaningful if I tried to live under spiritual guidance?
- Does this “letting go” for spiritual purposes mean a change in my activities, or rather a change in the attitude and state of mind in which I do them?
- Do I believe that doing so would aid my healing?
- What, then, am I prepared to give up (let go)?
- In the process of becoming more spiritually connected, how will I reorganize my life?

This last question is the key, for spiritual healing entails giving up many old patterns of thought and replacing them with connection to a larger Order, Intelligence, Power, or God. Some find this easier to contemplate through using an image, like Jesus or Divine Mother, as a personal guide. Others may wish to think of filling themselves with Light.

Autonomy: Deciding Where to Locate Ourselves in the “Territory” of the Mind

Spiritual growth is the cultivation of a new kind of awareness. Recall the metaphor of the mind as “territory,” comprising many different local environments. There is a “swamp”: that part of the mind driven by emotions, especially by fear or anger. Then there is a “prairie,” flat land, easy going, which encourages us either to drift or to get really busy and distracted from the task of healing. Another—perhaps seldom visited—part of our mental terrain is “mountain,” high ground so to speak, in which the air is clear and still, and from which our vision expands enormously. We all have these and other parts of the mind, which we are free to visit at any time. It is our choice whether we spend most of our time in the swamp, racing across the prairie, or on the mountain slopes.

Swamp

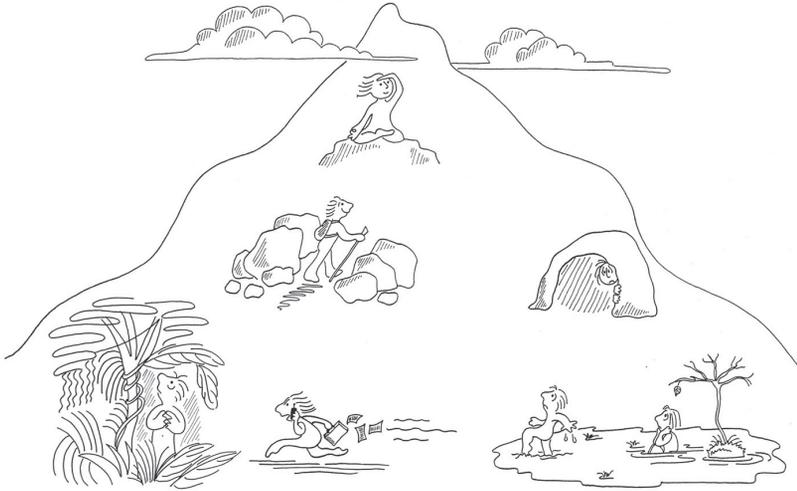
This is the area in which we feel pulled around by strong feelings, so that the power of choice and rational decision-making seems limited. Somehow when we are angry, it can seem easier just to go with the anger, rather than shake it off. We can feel the same way about fear.

1. Describe the situations (basically thoughts) that put you, or keep you, in your swamp. Rather than trying to address these important issues off the top of your head, use relaxation and imagery to create remembered scenarios, and reflect on them. The Inner Healer may be useful, as may meditation, and possibly discussion with others. Also for at least the next week, monitor your reactions during the daily round of activities—to get a “real life” insight into how you put and keep yourself in your swamp.
 - Consider anger first—expressed as irritation, resentment, frustration, impatience, or in other ways. What events “make” you angry? (Be sure to look at even the small hassles of daily life). When you are feeling irritated, what do you do that you don’t like? What keeps you in that state?
 - Now do the same for fear. What are you anxious about: possessions, family, behaviour of others, health status, other possible future events, your “responsibilities”? What keeps you in that state? Is there sometimes a vague sense of unease, and if so, what thoughts cause it?
 - Consider shame. What qualities about yourself do you dislike or feel ashamed of? What thoughts contribute to this feeling?

What other emotions can you can treat in the same way: sadness?
jealousy? . . .

2. Now consider in detail what you do (how you think and behave) when driven by these swampy feelings. Look at them one by one.
3. Having looked at what you may wish to drop (the “emptying” phase of the work), now consider how you could change your reactions to the same situations by choosing to locate yourself on higher ground. What would your reactions be then? What does that feel like? The best way to go about this exploration is to pick times (or imagine them) when you are feeling “swampy,” then use some of your tools to change the location or feeling. For example, if you are anxious, you might choose relaxation as well as imagery, or possibly the Inner Healer. If angry, the “resentments” exercise is excellent, the Divine Light, meditation, prayer, replaying scenes on an inner video, and so on.

Write about your experiences, and come to some conclusions about



what you can and will do in future both to avoid the swamp and to escape when you find yourself in it.

The Prairie

This is even terrain that can seduce us away from a healing state of mind in various ways. Perhaps the most common way is to get absorbed in “busyness,” walking fast, head down, cell phone at the ready, being very “important”! Or some people, finding themselves on a “prairie” with no urgent challenges, may conclude that there is nothing to be done, so that they can simply drift, trying to forget all about healing and personal growth—inertia, in other words. These two modes may seem different, but they have in common the unconscious aim of avoiding what is truly important to us.

Consider busyness first. It may be related to work, social engagements, even hobbies or pastimes, keeping up with the news, or attending to others’ stated needs. If we persist we may blunder into a jungle of engagements or responsibilities that can effectively cut us off from the Light. The process of analyzing what puts us into this mode is much the same as for swamp mentality.

1. Describe the situations (and consequent thoughts) that get you into “busy” prairie mode. Again use daily monitoring and active imagination to create scenarios, then ask yourself,
 - What activities do I pursue that are not really important and do not contribute to my personal growth and healing? (Consider paid employment, if any, social activities, attention to the media, attention to others’ needs, home maintenance, and others.)
 - What puts me into the busy mode? How do I think and behave when in that mode? Why do I stay there when I get into it? What are its satisfactions?
 - What am I afraid might happen (what would others think of me, or would I think of myself) if I dropped the busyness? What would that say about the meaning or significance or importance of my life? Am I using it as a way of escaping from looking at other important or fearsome issues in my life?
2. If, by contrast, when you have no immediate problems your tendency is towards inertia rather than busyness, ask yourself similar questions:
 - What thoughts do I have that create this feeling of inertia? (It is understood that where there are serious physical symptoms of disease, it may not be possible to pursue this work.) What do I think and do when I’m in a “dropping out” or drifting mode? What makes it easier to stay there than to get out of it?
3. Now imagine moving to higher ground, and looking back at yourself, obsessively busy, or inert. How do you view these behaviour patterns from this vantage point? Pick times (or imagine them) when you are feeling either busy or inert, then use some of your tools to gain clarity on why you do what you do, and to change the location or feeling. For example, if you are very preoccupied with irrelevancies (and this state, by its very nature, makes it difficult to consider alternatives!), you might use relaxation along with imagery, the Inner Healer, imagining an ideal day, meditation, prayer, and reflection.

Consider how the swamp and the prairie modes are related for you. For example, do you use busyness because of fear? Write about your

experiences and come to some conclusions about what you can and will do in future to avoid busyness or inertia, and to escape when you find yourself in these modes.

The Mountain

The self-healer would like to reside on the higher slopes for much of the time. This does not mean that we should expect to be there always: one of the features of this “territory” metaphor is that it acknowledges that we will be in different places at different times, and need not berate ourselves when we find this is so. However, as we cultivate a healed state of mind, we will find ourselves spending more time on the mountain, less in the swamp or on the prairie.

1. How does it feel to be on your mountain slopes? What are the rewards? How does it affect your daily life?
2. What stops you from getting there?
3. What helps you to get there (thoughts, behaviours, techniques, circumstances)?
4. Write a summary statement of the things you have learned from this exercise as a whole.

9

*Acceptance:
Living in an Accepting Way*

We have all experienced the difference between angry reaction to a person or situation, and a relatively calm acceptance, doing what's needed without getting angry or upset. Things play out much more smoothly and effectively when we are in the latter state. This does not at all mean being passive or resigned; it means acting without unnecessary emotional reaction, which, as you have seen by now, is simply the ego proclaiming its independence and entitlement to comfort.

At the spiritual level, acceptance is sometimes called “surrender.” The word is alarming to many in the West, because it sounds like abdication of one's rights. The picture of the Divine that is painted by some religions can be confusing, since the impression may be created that we are somehow like guilty children faced with a wrathful God to whom we must defer. A more helpful model would be to see “God” as a river, in which we are all floating; we have the choice of fighting the current as we try to go upstream, against the natural flow, or of gently steering as we allow the river to carry us downstream, going with the flow. We do need to steer—our active participation is necessary—but this works best if we align ourselves with the much greater power that supports us. A similar analogy is acting from a place on our “mountain” in the map of the mind that we looked at earlier.

The ideal strategy—in spiritual life as in ordinary social life—is acceptance wherever possible. The mentally healed state is an accepting

state. It may be expressed as non-reaction, non-attachment, non-judgment, not holding grievances. Or we may practise it by being constantly mindful and present in “the now.” Or we may conceive of it as trying to be conscious of the Divine, being guided, learning to “let go and let God,” in the words of the old Christian saying. These approaches all lead to the same state: one of stillness, peace, joy, and love. As Eckhart Tolle says, in his profound book *The Power of Now*, “Full attention is full acceptance is surrender.”

1. A simple way to practise full acceptance is to sit in front of a common object (which could be anything at all—a flower, a candle, a book), and just absorb, through half-closed eyes, all details of the object, without letting the mind make any editorializing comments about it. Try this a number of times, for ten minutes or so at a time. Do you get a feeling of knowing the subject of your concentration in a new way? How could this be applied more generally in your life?
2. Read the last chapter of Tolle’s book (if you haven’t done so already, you will probably need to read the rest of it first, in order to understand the last chapter). He discusses responding to serious illness and other crises by trying to remain in the present moment, the “now.” He points out that if we can do this, the experience, rather than being unmitigated disaster, can become a gateway into transformation for us. Try to apply this to your own experience over the next days and weeks, and write about it.

Writing a Life Story

In the appendices you will find a guide to writing “the story of your life.” This can be a very valuable exercise for people interested in healing change, since it lays out the patterns of our lives up to this point—patterns that may not have been clear to us. This helps us plan for change by avoiding some of the old traps and building on our strengths.

As you go through the writing, which is likely to take anything from one to four weeks, bear in mind the “three As” of self-healing. Ask yourself, as you consider each phase of your life so far, to what extent was I acting from a true awareness of what I needed (authenticity)? How much free choice did I exercise (autonomy)? To what degree did I experience and display tolerance, forgiveness, and love for others (acceptance)?

Don’t be depressed if your old self seems far from ideal! We all feel that way when we look back honestly. Use any dissatisfaction, instead, as a motivating force for beginning now to evolve.

Moving on from Here

I hope that you have experienced healing while going through the four levels of this course. Whether or not any physical disease has been affected, you will, I'm sure, have become more aware, more tolerant, and more able to design your own life from this point on. The work you have been doing is the work of our lives, really, although only a minority of us are fortunate enough to be exposed to it. Having learned this from my own spiritual teachers and experiences, it has been a natural thing to try to pass it on.

Most of us need support to keep going on this path, "work of our lives" notwithstanding! I'd suggest that you try to find groups with similar aspirations. They need not have anything to do with physical healing. Body-awareness methods like hatha yoga, tai chi, and chi gong are a valuable complement to the mental work we have been doing. Look for organizations, leaders, fellow-travellers who belong to some well-established tradition: examples might be yoga centres, Buddhist temples, or meditation groups of long standing. Find out whether the leaders exemplify what they teach in their own lives. No large sums of money should be demanded of you. You need not feel immediately comfortable in the setting, but you need to be sure you are accepted, that nobody is

MOVING ON

trying to get something from you; rather, an authentic spiritual or personal growth institution will be focussed on giving, on helping you. With time, perhaps quite quickly, you will begin to feel an undeniable urge to help others in your turn.

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Compiled by Claire Edmonds, PhD

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A

The Qualities of Long Survivors

This appendix is a copy of chapter 6 from my book Can the Mind Heal Cancer? (2005), which can be ordered from www.healingjourney.ca. It describes a study carried out with people who had outlived their prognoses by many years—“remarkable survivors.” The study was carried out by Kim Watson and myself, and is published in a journal article that can be downloaded from the same website. See A. J. Cunningham, and K. Watson. (2004). How psychological therapy may prolong survival in cancer patient: New evidence and a simple theory. Integrative Cancer Therapies, 3, 214–229.

The 22 subjects in the last chapter afforded us a privileged insight into their fight for life against disease diagnosed as terminal. We were able, in the study, to meet with most of them every week for a year, and to read and hear intimate descriptions of their feelings, reflections on their condition, and accounts of self-help efforts. Those clinicians who undertake long-term psychological therapy with people who have metastatic cancers may gain similar insights, but there are features of a rigorous study like this that enable us to go beyond the usual clinical impressions and derive conclusions with some confidence. While we are currently undertaking another study of this kind, it is my hope that other researchers will also see the advantages of following individuals in such an intensive way, and will provide their own descriptions of any relationship they uncover

between psychological adaptive styles and survival. What is the next step? We might ask, “What would be an ideal experiment designed to document the kinds of psychological change, and the eventual state of mind achieved, that assist people with life-threatening cancers (or other disease) to live substantially longer?”

An ideal study might begin by recruiting a large number (hundreds) of patients just diagnosed with incurable cancers. Careful medical histories would be compiled for each individual at the time of entry to the study, and predictions as to likely survival time made by experts for each participant. Psychological therapy would be provided, and a dynamic psychological “profile” obtained for everyone, by collecting data from interviews or therapy sessions (chapter 5) over a period of years. Those who greatly outlived their predicted lifespan would be of special interest, of course. The data from the interviews with these people after they had achieved this “exceptional” status would yield insights into the kinds of change that accompanied prolonged survival, and could be contrasted with the profiles of others who had not been so fortunate. Given a framework like this, it would be possible to determine whether, or in what respects, long-surviving patients were unusual or unique, and while it would not prove that the psychology caused the long survival, there would be a strong indication that it did in fact make a difference. Such an experiment is obviously extremely costly, perhaps impossible to do completely, but it is feasible to attempt parts of it. The study reported in the last chapter was one part, albeit on a small scale: it involved describing the psychological adjustments made by a relatively small number of patients over a year, and as we saw, there appeared to be a relationship between the nature of the adjustments and survival duration. The study I want to report in this chapter explores another piece of the ideal—interviews with individuals many years after they have outlived their prognoses. This time, instead of following the process of striving to heal, we are viewing their healing through a different window, by taking a snapshot of the state they eventually achieve. The subjects we have recruited for this purpose are all graduates from our Healing Journey therapy program, and most were in the study of chapter 5 or are participants in its current replication, so it is possible to contrast them with their peers who have not outlived expectancies.

To understand how this is an advance over the interview studies on remarkable survivors described in chapter 3, let us review some of the limitations of those earlier, more anecdotal reports, weaknesses that are

important because they have caused the work to be dismissed by most professionals in the field.

1. The most serious difficulty, often cited by critics, is that if we interview only “remarkable survivors” plucked, as it were, out of a much larger population of unknown size, we can’t tell if they are in any way unusual psychologically. We need some comparison with the profiles of others who fail to survive. If we can determine that long survivors have unusual or unique psychological attributes from the start, it becomes much more probable that these attributes contributed to their fortunate outcomes, whereas if many other people share these qualities, this is much less likely to be the case. We encountered a similar problem in chapter 1 when briefly discussing claims for magical dietary or other “alternative” remedies: if someone ingests substance X and recovers unexpectedly, he or she is likely to attribute the cure to that substance; but if we learn that 100 other people took the same remedy and failed to survive, we see that the first person’s happy outcome was probably not caused by X.
2. There was, in most cases, no thorough documentation of the medical histories of the interviewees. When the subjects for interview are obtained by advertising for them, there is a risk of attracting a tiny minority of people who are medically unusual, perhaps with mistaken diagnoses or anomalous disease; hence the need for thorough checks. Although such people are probably rare, there may well be a few of them among the thousands of people who have at some time been diagnosed with metastatic cancer in any large metropolitan centre. Some of these people may have survived a long time because they did not, in fact, have a serious cancer, in which case it would be misleading to link their psychological adaptation with their good outcome.
3. In the early studies, subjects were not known to the investigators apart from a single interview, or at most a small number of interviews, conducted long after their diagnosis and recovery. It is difficult to be sure, under these circumstances, that what people report accurately represents their thoughts and actions during previous years.

These design weaknesses do not disprove the idea that the mental state found in these patients was related to their long survival, but do

make that inference much less compelling. However, the common factors found among such long-surviving individuals suggest some kind of true relationship, as I discussed in chapter 3. Could we do a more reliable experiment of this kind, and compare the results with those of the earlier, more impressionistic accounts?

I'm going to describe the results of current, ongoing research in which we interviewed and analyzed the statements of 10 long-surviving graduates of the Healing Journey program (and I acknowledge here the skilled help of Kim Watson, psychological associate). A technical report on this study has recently been published,¹ with details on the nature of their cancers, and duration of survival beyond that predicted by the panel, as well as a qualitative analysis of what they said in their interviews. We also interviewed two comparison groups. The first of these included 6 subjects who had metastatic disease, and had applied to enter the program, but had not yet begun in it, or had done similar work elsewhere. We expected that these people would reflect a state of mind more usual in the population, which we were interested to compare with that of our 10 exceptional program graduates. The second comparison group comprised the 6 individuals who were at the bottom end of our "observed/expected" hierarchy from the experiment of the last chapter; that is, they were the 6 individuals who showed the lowest survival, in comparison with that medically predicted, out of the 22 studied. Since all died many years ago, we examined their home assignment writings and therapist notes from the period when they attended the weekly group therapy sessions. We expected that the psychological profiles of these individuals would also contrast with those of the long survivors.

In brief, the 10 people with extended survival have, at the time of writing, lived from 4 to about 14 years longer than predicted by a panel of experts. They have had a range of medically incurable, usually metastatic diagnoses: breast cancer (5 cases), and one each of colorectal, malignant melanoma, multiple myeloma, lymphoma, and uterine cancers. The picture we will derive from this investigation applies most directly to groups of people like the cancer patients we interviewed: all were middle-class people, all Caucasian, and all in the age range of 48 to 70 years of age. Nine were women. We can't necessarily assume that other groups of survivors would show similar characteristics, although as we will see, there was good agreement between what was found with these people and the various anecdotal reports in the literature.

While this is by no means an ideal investigation, many of the earlier design problems have been solved: in particular, these people were all survivors from the Healing Journey program and well known to us, in most cases over many years, before the interviews were done. Thus we can be confident that what they said reflected their enduring attitudes. Six were participants in the study described in chapter 5, or in its current replication. Thus we can also be confident, from the chart reviews by a panel of experts, that they were not medically anomalous at the time when we enrolled them—they were not identified as “unusual” or “exceptional” until several years later, by which time they had substantially outlived their predicted life expectancies.

Perhaps most important, we can document that the long-surviving interviewees in the present study were psychologically unlike most of their non-surviving peers during the first year of their struggles with cancer, being much more involved in their self-help than those who failed to survive. This strengthens the likelihood that their long survival was somehow related to their psychology, an argument for which there was no independent evidence in the early studies. Nevertheless, they were not unique psychologically: some other equally involved people did not outlive their prognosis to the same extent, although such individuals were not numerous. The fact that we do not find an invariable association between high involvement and prolonged survival is hardly surprising; other factors must also play a role, perhaps psychological attributes that we do not yet recognize, and also, most certainly, the biology of the disease. As noted earlier, the medical/biological aspects of a cancer may be so strong in many cases as to rapidly overwhelm the patient, regardless of psychological adjustment.

Because our long survivors were part of a larger study group, we are also able to test whether people with relatively low involvement ever outlive their predicted lifespan. The case for an association between involvement and survival would be stronger if they do not. In the study reported in the last chapter we found that patients with involvement scores in the lowest third do not live much longer than medically predicted, only 1 having outlived the prediction by as much as 2 years. Exceptional survival thus seems not to be an entirely chance event, but to correlate strongly with certain psychological attributes.

Thus from our data so far, we can say that patients who survive in “remarkable” fashion are not average psychologically; they tend to have

demonstrated high involvement early in (and throughout) their struggle with cancer. Although such involvement does not guarantee long survival, highly involved people seem to live longer than average, and low involvement is almost always associated with relatively short survival. In all previous investigations of this kind, there was no possibility of relating long survival to unusual psychological characteristics in this way. Now, as we move to the next stage of the work, describing the qualities of people at a point where they have outlived life expectancies by many years, we can be more confident that some real association exists between their psychological profiles and their long survival. In all probability, their engagement with their own healing has contributed to the mental state they have ultimately reached. We will see that there are many common features among these people, and that they do in fact resemble closely the remarkable survivors described in chapter 3, lending credibility to the growing picture of mental states contributing to favourable medical outcome. Later in the chapter we will put these observations together with a theory by L. Temoshok, to generate a simple but evidence-based account of the psychological factors that may contribute to disease and healing.

What the Long Survivors Told Us

In the interviews, which were 60 to 90 minutes long, we wanted people to tell us what was important to them, without imposing our own ideas. So my first question was simply, “What are your thoughts and feelings as you review your cancer experience, and how has it affected your life?” after which the interviewee spoke for as long as he or she liked. I would ask for clarification and elaboration of specific points, but was basically guided by the person I was interviewing. The conversations were taped, and a summary transcription made. A technical paper based on this study is in preparation; I offer a summary here.

A dominant theme emerging from a comparison of transcripts was that these people felt they were now living as they wanted to live, in contrast to a more obligation-driven existence before cancer. All 10 asserted that they were doing what they valued in life, and making their own choices. Examples of this autonomy:

“My life is different now, and many of the differences are quite positive ones for me, resting more, doing the things I love, spending time with people I love. Those are things I had difficulty making time for before.”

“I certainly gave up things that I was doing because I felt I ought to, and I think that it propelled me to a new level of self-examination and self-awareness.”

“I don’t see it as a gift, but it certainly was cancer that made me step back and reflect on what I want to do, and why I want to do it, and to make better choices for myself and enjoy life a little bit more.”

“I really feel I used to put a lot of demands on myself. I used to worry about being perfect in everything that I did. I’m still somewhat of a person that wants to please, and I’m being very selective in terms of what I’m doing right now.”

In 5 of the 10, the point was made that life had been simplified to allow this pursuit of the desired way of being:

“I’ve decided not to go back to work. I’ve never really given myself the opportunity to heal in the sense that I’m noncommittal to anybody, that I can just devote the time to myself. In doing that, my direction has changed.”

By contrast, these themes were much more weakly expressed in the comparison groups of people interviewed before starting the therapy, or among those from the Healing Journey experiment (chapter 5) whose survival was not prolonged. More characteristic among these individuals was a sense of confusion, or lack of direction:

“I have a hard time even identifying what I need and then putting it into place.”

“The constant certainty has been being frightened, being terrified, feeling helpless and hopeless.”

The self-help techniques that had been learned in the Healing Journey program were highly valued and were used by all the long survivors, although they tended to be employed “as needed,” that is, as stressful circumstances arose, rather than daily:

“I’ve realized that what works for us today is a changing thing; sometimes meditation is where I need to be, sometimes it’s journalling, sometimes it’s just quiet reflection, sometimes walking meditation. I’ve learned to look and say, ‘Is this what I need right now?’”

“Visualization and meditation helped me at that time, and I still do it, not faithfully every day, but it’s a great help a couple of times a week, or anytime you feel stressed you can meditate and try to still your mind.”

Meditation was singled out as a technique of particular value:

“Now when I can quiet my mind and I meditate and I’m still, what comes through is more direction, peacefulness, a feeling of love. That inner space is very valuable to me. I think that’s where I connect with what’s beyond myself.”

Eight of the survivors volunteered that cancer itself was now much less important in their lives, and although all but 3 of them still had some evidence of active disease, medical advice was viewed as only one facet of their continuing health maintenance. They had learned to take responsibility for their health themselves, and tended to see the cancer diagnosis as more of a motivator than a threat:

“One thing that I have learned is how important it is to have a sense of control about my treatment process. I need to know what’s going on, and I need to know that what I do can affect that and that I have a part in the decision making.”

“I seem to be telling myself it doesn’t matter what the doctors say, you’ve got your own journey. You can’t rely on them to tell you what you’re going to do when you really do know what you’re going to do in your own mind.”

The experience of overcoming a serious cancer, for at least some years, left all of these individuals with a sense that their lives had changed profoundly for the better. Among the improvements described were increased peacefulness, joy, more self-understanding, and an ability to take obstacles in their stride:

“I’ve experienced a peacefulness and a joy that I’m not having to run after the whole world and catch it by the tail. I don’t have to do anymore, I just have to learn to be.”

“It [cancer] truly, truly was one of the richest things that ever happened to me. If I hadn’t gotten cancer I would still be racing

through life doing everything perfectly, and everything so well organized, and life is so much richer and meaningful.”

Relations with other people were much improved, tolerance and loving acceptance being frequently mentioned, a lessening of their need to control others, more ready expression of feelings, and often a specific motivation to help others:

“There are patterns that I see in myself now that I didn’t see before, and I think I’m able slowly, slowly to notice the patterns that I get stuck in more quickly when they happen, especially in relationships with other people. Right now I’m at a point where I frequently notice it, and I sometimes can respond differently or create space in there to let myself react without jumping in a habitual way that I always did.”

“Since the cancer I’ve been able to talk about things as opposed to holding them in. I guess maybe I used to feel that what I had to say wasn’t that important, and now maybe it is.”

Finally, a greater sense of meaning in life and connection to a larger order or spiritual dimension was noted by almost all the long survivors. Gratitude, as much for the greatly improved quality of life as for the long survival, was expressed in almost all cases:

“When I started on my journey, I knew God was there, but I hadn’t connected in the sense that I could communicate with him. I wasn’t aware of what was going on around me. Now a lot more things come naturally to me, in the sense of giving and being able to sit alone and connect with God, being able to talk to him, being able to see messages that are sent to me.”

“I’ve been given so much from friends and people, the doctors I’ve had, that this coping skills course was here in Toronto: it could have been in Alaska and I wouldn’t have had access to it. I couldn’t have gotten the groundwork then that I need. I’m grateful just about every day.”

At this point I have to admit to an initial feeling of disappointment with the results of these interviews. Being someone who sees the spiritual search, and personal growth generally, as the major purpose of life,

I hoped, even expected, that this would be the dominant theme in our subjects. What we did find was less elevated: people living the way they wanted to live. However, in no instance did this mean a life of mindless pleasure-seeking! There was evidence of a greater meaning in life, or self-transcendence in the form of stronger relationship to something beyond the self, which for some took the form of spiritual connection, and for others was more aesthetic or interpersonal. Using their enhanced knowledge of inner psychological processes, these people were able to maintain a pattern to their days that brought peace and satisfaction. On reflection, I see that this result, which at first appeared a bit pedestrian, is actually hopeful, because if it is true that the approach to life that our subjects displayed is life-sparing, then it is within the reach of almost any motivated person. It is also, incidentally, the pattern described as healing by the very perceptive and experienced clinical psychologist Lawrence LeShan in his book *Cancer as a Turning Point* (referred to in chapter 1).

Integration of Studies on Long Survivors

I've already alluded to the close similarity in results between the interviews of long survivors from our program and the various interview studies describing people who claim prolonged survival (chapter 3). The reader may wish to refer back to Figure 3.1. Increased "autonomy," meaning perceiving the freedom to make one's own choices in life, predominated in both sets of analyses. The enhanced experience of joy, self-understanding, appreciation of life and sense of its value were also common to both. The "remarkable survivor" studies often reported that their participants had greater self-acceptance and esteem; this achievement is difficult to deduce from a single interview, but is an attribute we can confirm from our acquaintance with our interviewees over a prolonged time. Greater tolerance, and love for others, and freer expression of feelings—attributes that are closely tied to self-esteem—were found both by us and in the earlier reports. Substantial change, assisted by a variety of self-help techniques, was almost always noted, although the "spiritual-existential" shift remarked on in a number of the earlier descriptions of remarkable survivors, while present, was less dramatic in our interviews. It may be that when people fighting for their lives can access a structured program, the healing change becomes more gradual and reliable, whereas in people not given such help, a more sudden and perhaps less common kind of sudden

shift in attitudes is needed to generate the same impact on the physiology. Overall, it seems fair to say that the central change in the people described in all of these studies is towards greater authenticity in their lives.

We can add to this growing picture of survivorship the information from the prospective study reported in chapter 5. There the perspective was slightly different: we were following people with presumed fatal disease at a relatively early stage of their struggle. Because of the opportunity for intensive observation of these patients over a prolonged period, we were able to directly observe the qualities they brought with them at the start: their openness to change, expectancy that healing was possible, determination to help themselves—attitudes about which we are less certain when they are simply reported years after the fact, as in retrospective interviews. The focus in the Healing Journey study was then on what people actually thought and did over the year of observation, and we documented the degree to which they were motivated to apply the psychological and spiritual methods taught. Already at the end of the year, however, many of the same benefits were seen as in the later interviews of those who subsequently survived a long time, such as increased joy, peace, acceptance of others, and discovery of increased meaningfulness of life.

Figure 6.1 is an integration of the results from reports on “remarkable survivors” (chapter 3), from the Healing Journey study of chapter 5, and from the interviews of long survivors described in this chapter. Those who enjoy prolonged survival exhibit an initial openness and determination that drives them to help themselves. The Healing Journey study charted the dedicated efforts that resulted. As a result of these efforts, a more “authentic” self emerged, already evident after 1 year of healing work, and more fully documented in the interviews of survivors some years later, or of people from the wider community who claimed to have greatly outlived their prognoses. The changed individual now feels entitled to choose how to live, displays much greater acceptance of others (without allowing herself to be imposed upon), and enjoys a more peaceful and meaningful life. These qualities reinforce one another, of course: learning to accept others aids self-acceptance, which enhances the sense of autonomy. Learning to make one’s own choices increases the experience of the authenticity of one’s life.

What would a critic say to all this? That these studies are small, have a subjective component (the interviewer often needs to interpret what the

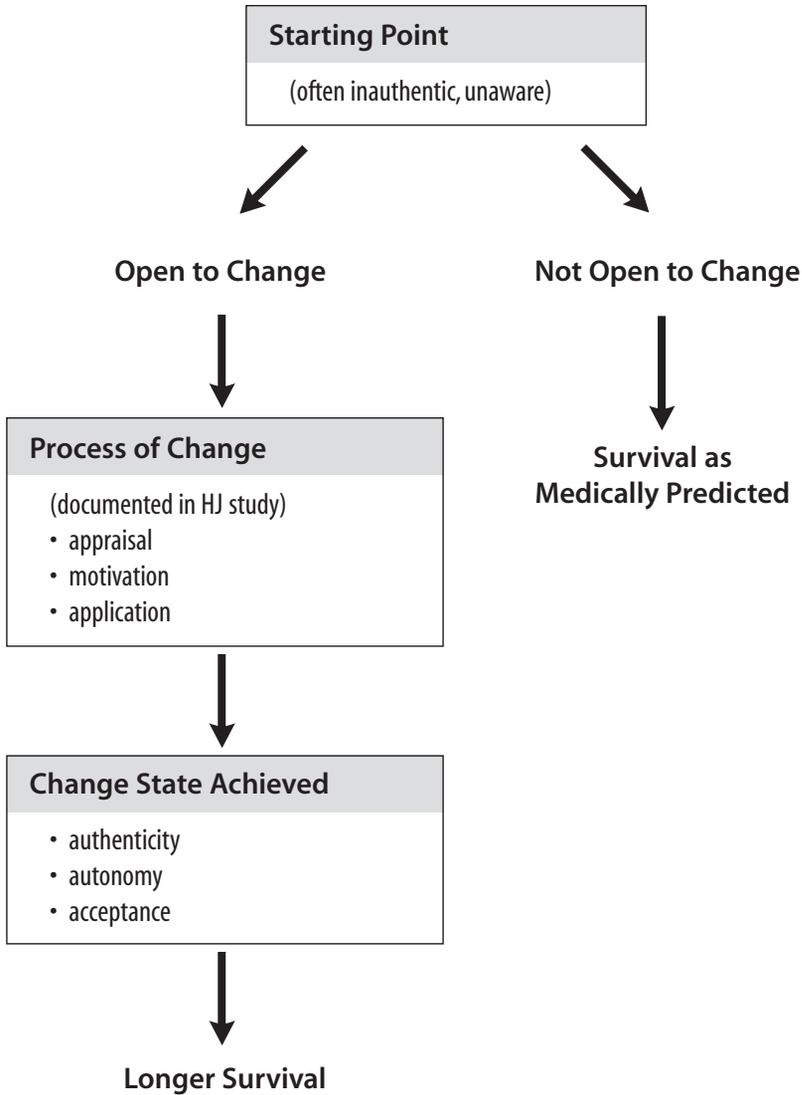


FIGURE 6.1 *The process of change in long survivors: an integration of the results from reports on “remarkable survivors,” from the Healing Journey study of chapter 5, and from the interviews of long survivors described in this chapter.*

subject says), and are restricted in their generalizability to a rather unusual sub-population of people with cancer. How would I respond? That convergence of evidence from several studies is always compelling in science. That the Healing Journey studies and the “interview study” reported above, although small, do not suffer from serious technical weaknesses, as a detailed reading of our peer-reviewed, published papers will show. We acknowledge that it is not possible to be sure that the psychological changes *caused* the longer survival, although no convincing alternatives have been offered by critics. The generalizability of all of these studies is certainly low, meaning that conclusions apply most directly to people similar to those who presented themselves, and results may or may not be reproducible in different populations. Studies of long survivors and the process of healing change need to be done in many settings, with differing groups of patients; when so little is known in a field, this kind of discovery-oriented or theory-building approach is much more appropriate than the theory-testing imperative that drives much current medical research (see chapter 4). No doubt, modifications and extensions of the current description will unfold. I will be very surprised if the overall conclusion is wrong, however, because it makes such good, developmental *sense*, a point to which we now turn.

A Developmental Look at Cancer and Healing

There is one more, important set of evidence to add to our growing, integrative picture. Recall the work of Lydia Temoshok (chapter 4), who defined a Type C adaptive style, an attitude of “niceness” and denial of one’s own needs, common among people with cancer, and associated with faster progression of the disease. We can add to this the reasonably consistent evidence for a link between repression of emotion and higher risk of cancer progression. Temoshok’s view of the role of mind in development of cancer is that the early development of this self-protective, placatory style of relating to the world puts a great strain on the regulator systems of the body, such as the immune system. This demand makes the body less able to resist or control later onset of disease. She also suggests that the logical way to use the mind to fight cancer is to try to reverse the harmful elements of this self-denying style. That is also the conclusion Lawrence LeShan draws from his clinical experience, as we have seen. Now, note how this is precisely what the long survivors have done, in the studies just described. They have become determined to live life

as they wished to, as opposed to always trying to please others. Through their work and change they have understood the load they were imposing on themselves, seen its irrationality, and worked hard to reverse it. As a result, far from becoming selfish monsters, they achieved an acceptance of self and others, a joyful appreciation of life, and a sense of meaning and fulfilment in life that most “well” people would envy.

This is what I mean by the model or hypothesis “making sense.” There is a mirrored symmetry between the concepts of what promotes cancer and the evidence on what prolongs survival (Figure 6.2 puts together diagrammatically the development and the reversing of mental states that promote cancer). Furthermore, the model does not depend on the correctness of the specific details of mental states that are proposed as promoting development or later retardation of cancer growth. The predisposing psychological factors might not always be Type C. The important point is that some early distortion of the healthy, authentic adaptation to life occurs, and that this causes strain. The neurophysiologist Bruce McEwen calls this “allostatic load.”² If we grow up unduly fearful, or for that matter with any other kind of maladaptation, like constant anger or depression, we may place a lifelong stress on the regulators of our health, in particular the cardiovascular, immune, respiratory, nervous, and detoxification systems of the body, and on the cellular-level micro-regulators that they influence in turn (chapter 2). Note that this is a general theory, applicable to many diseases, not just to cancer. For example, the theory would predict that the Type A personality develops early and places strain particularly on the cardiovascular system. It would further predict that diminishing the heightened risk of heart disease (although probably not established damage) could be accomplished by reversing the distorted adaptation—learning to react to challenges with tolerance instead of anger. There is some evidence for the success of this approach, not yet universally accepted (chapter 2). This explanation of events is simple and makes sense. It does not claim, simplistically, that “the mind *cures* cancer” or any other disease: the prediction merely is that to the extent that the mind and its distortions are important, reversal of the harmful adaptation will be helpful. The extent of the contribution of mind has to be established by experiment, and one way to do this is to evaluate the effects of psychological change, assisted by therapy.

There should be nothing in this model to offend even the most materialistic of readers, or to generate any feelings of blame or guilt among

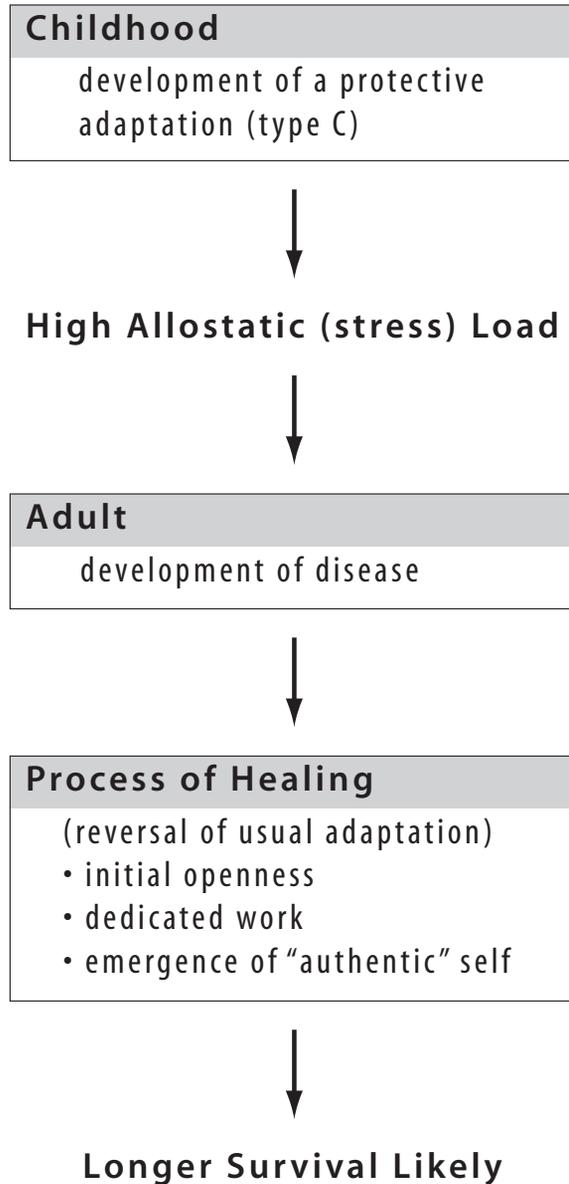


FIGURE 6.2 *A simple developmental chart of possible mental contributions to the onset and healing of cancer*

people with cancer. I am not invoking any esoteric “powers of mind,” simply suggesting that bodily health is promoted by optimizing the health of the mind, a return to an equilibrium that has been disrupted early in life for reasons outside one’s individual control. This trait is more marked in some people than in others; those individuals carrying the greatest allostatic (stress) load may be more likely to contract a variety of diseases in adult life. Many factors (such as genetic, environmental, and infectious) contribute to disease, and consequently, many modes of treatment may be helpful; working through the mind to reduce strain is one important mode.

Summary

While chapter 5 focused on the thoughts and actions of individuals as they were fighting for their lives against metastatic cancer, this chapter examines the influence of mental states on prolongation of life in a different way, through interviews with patients some years after they have outlived their medically predicted lifespan. I report on our own interview study of survivors who have taken the Healing Journey program, then show the strong similarities that exist between what these individuals report and the various accounts from “remarkable survivors” discussed in chapter 3. We then put this information together with Temoshok’s theory, that cancer is more likely to occur in those people who developed, in childhood, a particular kind of placatory and emotionally repressed coping style. We see that what the long survivors appear to have done is to reverse this way of adapting to the world, claiming instead their right to make their own decisions about how to live their lives. This enhanced authenticity is associated with greater acceptance of others, and of oneself, and leads to a more peaceful and meaningful experience of life. It also appears to help people live longer, as well as better.

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B

Guide for Writing a Life Story

The purpose of the exercise is to review and integrate the main experiences and feelings of our lives. One way is to write on each of the twelve topics discussed below. You can write as much or as little as you like: about two pages per topic would be a reasonable goal. In exploring each subject we will obviously be relying on our memory of past events, but to assist recall we can use any or all of a number of these techniques, which have been divided loosely into “left brain” and “right brain” methods.

The two halves of our brain are not symmetrical, but are specialized for different tasks. The left side, in most people, is concerned with logical, rational, verbal thinking: we draw largely on its power to describe past events and to analyze them for recurrent patterns. One useful device here is to write “letters” (not for sending) to important people from our past or present life, or to put together word “portraits” of them. The right brain deals more with spatial, intuitive, emotional matters: we will want to use relaxation, meditation, and imagery techniques that encourage the right side of the brain, in exploring important past events in order to recover the deeper feelings attached to them. A useful right brain approach is to conduct an imaginary dialogue with parts of ourselves, or with remembered figures, objects, or events from our past.

Methods for Working on Self-Understanding (in Journal and Life-Story)

“Left Brain”: sensations or perceptions, and thoughts (written down)

- Recording events, memories, plans
- Reflecting on these—looking for common patterns
- Writing “portraits” of others, or unsent letters to them

“Right Brain”: emotional and intuitive (to be done in a deeply relaxed state with subsequent recording in words and/or pictures)

- Pouring out feelings
- Meditation
- Dreams
- Poetry and music
- Guided imagery
 - ▶ finding a peaceful place
 - ▶ recalling and exploring past events
 - ▶ contacting deeper aspects of self (e.g., an Inner Healer)
 - ▶ having “dialogues” with people, objects, the body, cancer, situations, and events

Topics for Life Story

Read through the list first, noting the overlap between areas. You will want to spend a number of separate sessions on this task. Keep your writings in a safe and private place, to allow honest and frank self-expression. They will not usually be shown to other people.

1. Where Am I Now in My Life?

Begin by describing, in two pages or more, the most recent period or phase of your life—it could be months or years in extent. What is the main theme of this period? What have been its most difficult problems, its chief rewards? What feeling or tone underlies it all? Add a “portrait” of yourself as you are now—in a few, brief sentences. Don’t judge yourself morally in any of this work, just explore and record.

2. Stepping Stones

List the eight to twelve major events or stepping stones of your life (or, if you prefer, see your whole life as a branching tree or road and identify the major branching points). Write a brief note on each stepping stone or

branching point, its importance in your life, and the feelings it aroused. Speculate on what might have happened if you had taken another road or direction at each point: do you have any desire now to pursue some of these “roads not taken”?

3. Family History (as It Affected You)

Write brief “portraits” of your mother, father, brothers, or sisters, and any other important family members. Who had the major influence on you, and what was it? What is your relationship to surviving family members now, and how has it evolved? What have been the “roles” played by different family members, including yourself?

4. Education History

Explore and record memories and emotions related to your passage through school, and any higher or subsequent education and training.

5. Career or Life Work

After first describing your adult occupational history, ask yourself if this has been the major focus of “ambition” in your life, and whether it has satisfied your desire to find meaning and achieve goals. What successes, failures, frustrations, and rewards has it brought? What is the role of your career or job in your life now, and for the future? If you are not doing what you want to be, what would you prefer? (Don’t consider how feasible your ideal occupation would be: the first task is to clarify what it might be.)

6. Major Life Crises and Development of Coping Skills

How have you reacted to any major crises? What methods have you developed for handling stress?

7. Health and Body Image

“Body image” is the way you have viewed your body: attractive or unattractive, weak or strong, over- or under-weight, and so on. Has it been affected by getting cancer? List illnesses and ways of dealing with them, prior to cancer, including any mental problems such as anxiety, depression, despair, habitual boredom. What are your usual moods and what influences them?

8. Sexual Development

Describe frankly to yourself the development of sexual feelings, interests, and experiences. (This section, and any others that are sensitive, will be kept private. You can lock your life story away, or use a code in writing it.) Evaluate also your present sex life and compare it with what you feel might be ideal. How important has touch been in your life?

9. Interests, Hobbies, and Social and Leisure Activities

Describe the history of these activities in your life and assess how important they have been and are to you. How much of your time and energy goes into them? Do you see any need for change? What recreational interests (e.g., music, reading, crafts, games, writing, and creating) do you most want to develop? How important have vacations been to you? Do you remember some in particular?

10. Relationships: Loves and Hates

Describe the history of relationships with others that have been accompanied by intense feelings. If you are presently married or living with someone, explore this relationship. How do you see him or her, and how are you seen in turn? Are your needs met? What would improve the relationship? If you have children, you may wish to consider these interactions also. If you have not had many, or any, strong love relationships, can you find out what has prevented you from forming such bonds?

11. Experiences of Death, and Concepts of It

Who has been close to you and died, and what were your reactions? Do you believe in a soul that survives death? What experiences underlie this belief?

12. Development of Meaning, Values, and Goals

Describe what seems of value to you in human life and how your concepts have developed. Include a brief history of your religious or philosophical convictions, explaining why you feel as you do now.

Summarizing

Read back over your life story looking for recurrent themes, and important ideas and feelings. You may have already made a brief summary of

each section. Perhaps now you can draw it all together by asking some general questions, such as, What has been the central theme of my life to this point? What were its major stepping stones, its achievements, satisfactions, and disappointments? To what extent have I “created” my own world?

You will obviously have been thinking also about the most life-affirming direction for your life from now on. This question is central of this course, and can be best explored from a sound understanding of one’s life in the past.

