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Editorial

A Special Section on Spiritual Emergency
GIOVANNA CALABRESE

Special section

Spiritual Emergency
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Why We Humans Have Been Chronically Stalled For Millenia In Our Evolutionary Maturation: Tapping The Dormant Global Power Of ((Transpersonal Life))© ASHOK GANGADEAN

The Organization, Transpersonal, Spirituality and Values in the Workplace
JOHN DREW
HO LAW

Open Awareness: Holding the Liminal Space in Transpersonal Coaching and Therapy
JEVON DÄNGELI
HENNIE GELDENHUYS

Interactive Meditation Practice as Research Method: An Introduction to Embodied Spiritual Inquiry
OLGA R. SOHMER

VIII
3rd Global Transpersonal Symposium 2018, Veracruz, Mexico: “From Inner Peace to World Peace”. The Convergence of Healers and Explorers of Consciousness
MARIO ALONSO MARTÍNEZ CORDERO

News from Transpersonal World
EDTR Professional Academic Research Membership

Reading proposal
“Metamorphosis Through Conscious Living” Edited by L. McMullin et al.
“Biotransenergetics” by P.L. Lattuada

Authors’ instructions
Authors’ Instructions Text Format
Information about ITI
Notice to subscribers
People going through Spiritual Emergency (SE), often describe experiences of contact with the divine, which are at times, connoted as physical perceptions; reports can include hearing god’s voice or seeing something pertaining to the extraordinary. They may also experience a sense of unity with the universe accompanied by dissolution of ego-boundaries. Other times there is a contact with the shadow, with demonic visions. Similar descriptions can also be found in two different areas, namely religion and psychiatry.

In terms of religious phenomena, mystical experiences are described from the three monotheist cultures. In the Christian tradition, we have examples from Hildegard von Bingen or Saint Francis amongst others; in the Hebrew tradition, Abraham ben Samuel Abulafia; and in the Muslim tradition, being the Sufism the most known. In the Eastern religions, both Hinduism and Buddhism have an even more prominent approach to the transcendental dimension that is considered as part of this earthly life. Last but not least, shamanic cultures from different parts of the world take these kinds of experiences into account.
Studying these phenomena, Jung elaborated on the concept of the collective archetype.

In the study of psychiatry, we can find similar narratives from people classified by the official academic psychiatric criteria as psychotic or manic.

Is there a difference between the experiences that come from these two fields? From the transpersonal psychology perspective, there is no difference as they are both expressions of contact with a spiritual, transcendental dimension.

However, subjects in the second group undergo the stigma of psychiatric diagnosis, coupled with all the consequences of pharmacological treatment. These often have very strong collateral effects including social exclusion. Why does this happen?

I think there are many different factors to be taken into account. The first refers to social influences for those cultures that call themselves atheist and materialistic. Spiritual experiences, coming either from the numinous or dark side, are neglected by definition. Therefore, being considered abnormal, that is “Deviating from what is normal or usual, typically in a way that is undesirable or worrying” (cit. https://en.oxforddictionaries.com), they are treated as a disease, either physical or psychological. In fact, in the diagnostic process the first step is to exclude intoxication or some physical pathology of the brain, before referring the patient to a psychiatrist.

Another aspect to be considered is that subjects going through SE’s often have their quality of life damaged causing problems in their relationships, both at a personal and at a social level. This in turn, affects their ability to work and to face everyday life.

Furthermore, it cannot be denied that there is profound distress associated even with the most numinous experience, when it is not integrated into every daily life. There can be even worse suffering when the SE leads to contact with the shadow. This torment of course reverberates with relatives as well, who do not understand what is happening to their loved ones and do not know how to help.

The special interest group of division 32 of APA had the merit to introduce Religious Problems in DSM, thus allowing SE’s to be recognized as a nosography entity different from psychotic disease.
This ensures that people who experience these states have access to adequate therapeutic interventions, however, on the other hand this may lead to the risk of excess medication. In any case, the problem of helping people going through SE, still remains. How can a network to support these subjects be organized? This would obviously entail not only providing help to the family and cooperating with other health care professionals that might be involved, but assisting them to reframe their experiences in their lives once they seem to get back to “normality.” In fact, it is of absolute importance to understand the full meaning of an SE from an evolutionary perspective, as it can be considered an overwhelming experience, but a very real part of the path towards spiritual growth. In this special section we will report the testimonies of three different groups working in this field: Rozalia Kovacs-Napier and Ali Chapman provide information about the International Spiritual Emergence Network, Matthew Gorner about the Spiritual Crisis Network in the UK, and Elena Toscan, Fabrizio D’Altilia & Loretta Illuminati, about their experiences in Italy with the Integral Spiritual Emergency Project. We hope that this section will raise more interest on the organization of network to help those subjects going through the experience of spiritual awakening.