

Uncanny Phenomena in Psychotherapy: Loving Messages, Quantum Non-locality or Madness?

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Abstract

This paper is based on my master's thesis research into Pakeha and Maori psychotherapists' and counsellors' experiences of inexplicable phenomena while working with clients. These phenomena may take the form of 'uncanny' knowings, 'synchronistic' dreams, bizarre visual images, or 'spirit forms'. The experiences create feelings of profound loving connectedness and of being part of a greater whole where self and other, dream and reality, and time and space are not as distinct as they appear in everyday life. At these times, therapists and counsellors often describe feeling as if they have access to universal knowledge or are being spoken to by an intelligent Other. I discuss these experiences and interpretations and the problematic place these phenomena have within psychoanalytic theory whereby they have largely been excluded from discussion.

The participants

I interviewed eight psychotherapists and counsellors, of whom three were Maori and five Pakeha.

The experiences

Therapists described a variety of different experiences that took the following forms:

- 1) Seemingly being able to know things about clients, which the everyday view of the limitations of our senses tells us cannot be known.

Example 1: In a session, one therapist felt an "intuitive impulse" to go onto the deck outside her therapy room, pick the one rose that was there and give it to her client. The client then burst into tears and said, "I just dreamt that you did that".

Example 2: A therapist found herself wandering around her practice, while

waiting for a late client, looking for ice in the freezer, then going into the bathroom noticing a flannel. She didn't need ice or a flannel but noted to herself that they were there. When the client arrived, late, after having had a minor car accident in which she had hurt her leg, the therapist quickly got the ice and flannel and put them on the client's bruised leg.

Example 3: Several therapists knew things (in a conscious coming to mind), about what clients were about to do or say, ahead of time: for instance a therapist thinking of a client they hadn't seen for ages, not long before they phoned.

- 2) Seeing subtle visual changes in clients' appearances, which appeared as external and distinctly different from something imaginary, and sometimes heralded something a client was just about to speak about.

Example 1: Suddenly seeing the texture of a client's skin as like thick paint just before she began to speak about a painting.

Example 2: Seeing the face of a woman superimposed upon that of a male client.

- 3) Having intense, embodied emotional experiences, which felt like experiencing the internal life of a client, in a very real way, either in the room or in a dream.
- 4) Dreaming of clients in scenes that were later recounted and described as having taken place in 'reality' by the client.
- 5) Communication, involving all senses, with moving 'spirit forms'.

These phenomena raise a lot of questions about perception, fantasy and reality.

In this paper, I will mainly concentrate on the experiences, which were described as 'knowings'. The word knowing was used in different ways: knowing by making correlations, knowing experientially, and knowing intuitively. During the research, I asked about two areas in relationship to these experiences:

- 1) The state of being the therapists and counsellors were in at the time the experiences took place.
- 2) The meanings they made and the explanations they gave themselves about their experiences.

The state of being

Descriptions of the states of being were remarkably similar. Everyone described themselves as being in either ‘an altered state’ of consciousness, a ‘meditative state’ or a ‘reverie’.

This state was characterized by:

- An openness or receptivity to ‘whatever’ may come to mind
- A heightened sensitivity or attunement to the atmosphere
- A lack of self-consciousness
- The differentiation between inside and outside seeming less clear
- Time feeling slowed down, or there being a feeling of timelessness or the future and past being all being present at once
- A sense of being in ‘a part of’, or ‘attuned to’ the world

This also accords with spiritual states of mind, described by practitioners of meditation, where everything seems interconnected in some way, where there is a sense of timelessness and the boundary between self and the world seem to dissolve in such a way that self and the world seem as one. This is different from the everyday concept of ourselves as being in three-dimensional space and linear time. It is what phenomenologist Max van Manen (1990) calls the ‘lived experience’ of space and time. Merleau-Ponty suggests that this is the closest we may come to “re-achieving a direct and primitive contact with the world” (Van Manen, 1990:38). Van Manen refers to this direct contact with the world as “awakening the soul to its primordial reality” (1990:50). Here Van Manen uses the word ‘reality’, not to refer to a concept of something outside himself, but to the ‘soul’s reality’, which is embedded in the world. However in psychodynamic psychotherapy the idea of being in primitive direct contact with the world is problematic and generally treated as an unrealistic, wish-fulfilling fantasy. I will discuss the effect of this more as I go on.

In the hermeneutic phenomenological view everything is interpreted from within a historical and cultural context. The ‘world’ is not the environment-as-object as described by science, nor is it internal, as symbol. Rather, ‘world’ is neither ‘held in the mind’ nor ‘out there’ to be apprehended. Because we are embedded and embodied in the world, we can never be objective. Thus the possibility of absolute truth does not exist. Also, within hermeneutic philosophy, “atemporal, or transcendent knowledge is impossible” (Leonard, 1989: 50). Phenomenologists also define the word ‘unconscious’ in a different way to psychotherapists. Merleau-

Ponty says, “Unconscious is to be absent from oneself while being present in the world” (Romanyshyn, 1982:156).

In contrast to this I believe that although psychodynamic psychotherapy is also an interpretative art it is still fundamentally based in a Cartesian worldview. This worldview is the everyday view of the world in which the self is a subject and the world, or the environment, an object. The self contemplates the external world of things, which exist, via representations or symbols that are held in the mind. Also, unlike phenomenology, psychotherapy speaks of an atemporal realm of ‘unconscious mind’, which exists for itself beyond the perceived world.

The Cartesian worldview is dualistic and conceptual and so objects and experiences are divided into inside and outside, fantasy and reality, self and other. The ability to make these distinctions is very important for healthy functioning in the world and the inability to make them is central to what we call mental illness. For this reason, experiences in which the separation between inside and outside, fantasy and reality, self and other is not so clear have tended to be pathologised within psychoanalysis and viewed as omnipotent or regressive fantasies and as indicative of a lack of ego development. However the possible meanings we make of these phenomena vary according to the cultural worldview used to interpret them.

Interpretations

Although the interpretations varied according to the cultural influences that had given the therapists and counsellors some way of making sense of their experiences, (eg psychotherapy literature or spiritual beliefs, including the Maori worldview) there were some striking similarities between them. Psychodynamic psychotherapists initially tended to use language from the psychotherapy frame: for instance, they interpreted experiences of seemingly being able to know inexplicable things about their clients as being able to access their clients’ unconscious minds. This was envisioned in different ways. Some therapists described being in a ‘merger’ with clients as if ‘the unconscious’ of the therapist and client were overlapping in some literal way. Others spoke of ‘the unconscious’ as being ‘between’ themselves and clients, as in a field, which it is possible to ‘enter into’. Others spoke of ‘the unconscious’ as a timeless realm in which knowledge of other times or places might ‘exist’ and be accessible. Some envisioned a transmission between unconscious minds, using a metaphor of having antennae with which to pick up information from the atmosphere. The unconscious was

generally spoken of as intelligent and communicative. These ways of speaking of the unconscious are common amongst psychotherapists.

Although the Pakeha and Maori interpretations of meaning differed and some people did not know what to make of their experiences, many described their experiences as 'spiritual' or believed them to be a sign of the involvement of 'something more' than a transaction between themselves their clients alone. Many described this as either attuning or resonating with knowledge from another spiritual 'realm' or realm of mind or being a channel to messages, which are sent by a mysterious, intelligent Other (Unconscious, God, and Tupuna) that is communicating intentionally for the purposes of healing.

Some Pakeha referred to a mysterious force, God or knowledge that they believed to be 'everywhere'. Maori all spoke of being mediums to messages from ancestral spirits. All the Maori and one Pakeha had a strong belief in the 'living reality' of ancestral guides.

So how do we understand this?

These phenomena raise a lot of questions about whether such experiences can be considered knowings and, if they can, how such knowings can be understood or explained. I will address some of the questions raised in the next paragraphs as well as some of the psychoanalytical debate and confusion about such phenomena and the beliefs and assumptions which therapists and counsellors base their interpretations. I also explore some explore some of the traditional and pathologising ways in which psychoanalysis has interpreted such phenomena and how this has meant that these sorts of experiences have largely been hidden from discussion within the psychotherapy community.

Thinking about the questions

- Are these experiences of apparent 'knowing' explainable in mechanical ways?

Certainly some of the occurrences, especially those which we usually refer to as 'feeling what the client is feeling', which therapists commonly call 'projective identification', could be explained by subtle perceptions. Thomas Ogden expresses concern about the literal way psychotherapists speak of 'feeling a clients feelings' or a client's 'projecting parts of themselves into the therapist'. He is very clear that he believes projective identification to be a "group of fantasies" (1979:370). He says that even though the experiences feel real, they are not to

be thought of as real transmissions from one to the other. Indeed, there may be many explanations for these experiences when there is some contact between the people involved. Scientific research on mirror neurons shows how our own neurons actually fire when we see movements in another. Empathy is based on this. Vibrational information may be able to be reconstructed, for instance, from the tone of voice on the telephone. Freud, for instance, explained apparent 'telepathic' communications as the analyst having forgotten or being unconscious of having noticed something that was said by a client, in a session, perhaps some weeks previously, but which later appeared as a seemingly "uncanny" (Freud, 1925) knowing. It may also be that therapists or clients make too much of the similarities between the thoughts or actions and the later events when, in fact, they are a wishful makings of similarities due to a desire to believe in mysterious or magical communication. Doubting in this way is necessary for our thinking to be rigorous about these phenomena. However, I believe that many of the examples cannot be so easily explained as subtle perceptions, either because there has been no contact between the therapist and client for years, or the event 'known about' had not yet happened.

- What do psychotherapists believe about the unconscious mind and how it operates?

Does such a realm of mind actually exist?

Belief in the possibility of accessing other realms of knowledge or the past and future, often called divination, is common in many traditions and cultures: Celtic, Maori, Christian and others. However, although the idea of divination is not taken seriously with psychoanalytic theory, we do have a concept of 'the unconscious mind', which we believe to be real (as in existing for itself). The word 'unconscious' is used in many different ways, which reflect differences and contradictions in the theoretical language. In particular it is used to refer to both a place and an aspect of mind. This leads to 'the unconscious' being used to refer to the thing that is accessing information as well as the 'thing' or 'place' being accessed. Both Freud and Jung also use the word 'unconscious' in this double way. The unconscious is also often spoken of as not bound by time and space. This leads therapists to speak of it as literally extending in space and time, for instance as a field, or of a transmission of information through space which can be 'picked up' by the unconscious. 'The unconscious' is also used as if it is a form of consciousness. This common usage reflects the confusions in the theory.

I will be particularly referring to the ideas of Freud and Jung because the two men wrote about the sort of inexplicable phenomena explored in this study in a

way that few have since. Their different conceptualizations of 'the unconscious' mind and communication also underlie the way 'the unconscious' is commonly thought about today. Jung's vision of the unconscious came out of his own experiences of what he calls non-temporal states and the quality of objectivity that they had. He says:

It is impossible to convey the beauty and intensity of emotion during those visions. The visions and experiences were utterly real; there was nothing subjective about them; they all had a quality of absolute objectivity. We shy away from the word 'eternal' but I can describe the experience only as the ecstasy of a non-temporal state in which present, past and future are one (1963:275).

Perhaps it was the sense of objectivity about these experiences that led Jung to conceptualise a collective unconscious that went beyond the bounds of the individual and was connected to divine wisdom, or universal mythic images (archetypes). He also described the individual ego as like a peak of a wave that emerges out of a deeper and more fundamental ocean of oneness or interconnectedness. Jung described these apparently acausal phenomena as 'synchronistic' events in which the "duality of soul and matter seemed to be eliminated" (Von Franz, 1978:27). Possibly influenced by the quantum science of his day Jung suggested that: "The unconscious, as the result of its spacio-temporal relativity, possesses better sources of information than the conscious mind, which has only sense perceptions available to it" (1963:292). Here he is speaking of the existence of an 'unconscious' aspect of mind, as if it is a form of consciousness, which is not bound by the time and space and which can access other sources of information than those that can be accessed by the senses. However Jung is not referring to the 'unconscious' as disembodied in the sense of being outside the body in space, for instance as in a field, but as operating in another way altogether, perhaps more like quantum non-locality. In a conceptual, Cartesian way, Jung is trying to describe and find explanations for paradoxical experiences in which there is a both sense of embeddedness in the world, at the same time as a sense of perceiving the world as separate from the self.

In contrast, Freud spoke of the unconscious as an aspect of the individual mind and as place of repressed memories and 'id' impulses. He also spoke of unconscious processes, which were timeless and operated on the pleasure principle. Speaking of 'the unconscious' as if it is a literal place associated with primitive impulses and wishfulfilling fantasies (the pleasure principle, as opposed to the reality principle), has become accepted into everyday language. Because of the apparently 'magical' nature of the experiences Freud treated them with doubt

and suggested that instances of the 'uncanny' "led us back to the old, animistic conception of the universe" (Freud, 1925:240.). Eisenbud suggests that Freud's wariness was based in two fears:

That the future of psychoanalysis would be somehow endangered if analysts-became preoccupied with the "occult" and that the work might bring him face to face with his old adversary – religion, perhaps in the sense that the data might be seized upon by hungry religionists as proof that the materialist conception of the universes has not given us a correct picture of reality after all (1946:259).

These concerns are understandable because in some ways seemingly 'telepathic' phenomena do challenge several of the assumptions on which psychoanalysis is based, particularly the premise that the mind is a thing in itself, which is separate from the world and others' minds, and the principles of projection and transference. Totton says that the possibility of "telepathy is not allowed to be 'real', but is forcibly aligned with the symbolic or the imaginary: in other words" (2003:201). In 1919 Freud said to Ferenczi, who wanted to present his telepathic experiments to the next International Psychoanalytic Association conference, "I advise against. Don't do it. By it you would be throwing a bomb into the psychoanalytical house which would be certain to explode" (Jones, 1957:42).

However, although Freud's reputation of being a reductionist scientist has become widespread, the mystical side of Freud who was interested in "the phenomena of thought transference", which he felt to be "closely allied to telepathy" (Freud, 1933:97) has not become so widely known. Despite his publicly expressed doubts, Freud remained secretly intrigued and in 1926 wrote to Ernest Jones saying: "When anyone adduces my fall into sin, just answer him calmly that my conversion to telepathy is my private affair like my Jewishness, my passion for smoking and many other things" (Appel, 2000:42). Today, these things still feel dangerous to discuss within psychoanalytic circles because of their associations with omnipotence, madness or "the black arts" (Eisenbud, 1946:260) and yet many therapists and counsellors have secret beliefs about their experiences that are withheld from discussion.

- Are these experiences omnipotent or psychotic fantasies?

One of the reasons the claims to these experiences as 'knowings' are treated with doubt in psychoanalytic terms, is that they seem to be omniscient on the part of the therapist and potentially omnipotent on the part of the client. Omniscience and omnipotence are considered not only to relate back to early states of mind

but also to be contrary to the development of secondary process and symbolic thinking, which comes with the ability to discriminate between inside and outside, self and other. Symington says: "It is through omnipotence that one hallucinates, distorts one's perceptions, obliterates memory, sabotages thought, banishes guilt and substitutes fantasy for reality. Through omnipotence, the processes of the mind and the mind's objects are destroyed" (1996:175). Noel-Smith suggests that knowledge of the 'real' world is found only through the giving up of omniscient knowledge and coming into the boundaries of time and space.

The arrogant assumption that one can actually know the outer world through *being* it, through incorporating it, must be relinquished and the loss of the possibility of an omniscient understanding of the real world, unbounded by our organising principles of time and space, must be relinquished (2003:20).

The attitude here is clear, the suggestion of direct experience of the world, or of another, is omniscient and arrogant. In terms of psychological development, these criticisms are valid. In an everyday way, the ability to differentiate self and other, and inside and outside, is important for mental health. The inability to make those differentiations necessarily evokes concern. However, although the therapists and counsellors, within my research, could be said to be interpreting the similarity of two events as a form of omniscient knowing, this is not the same as the sort of omnipotence that Symington means. An omnipotent defence is not relational. These therapists are engaged in the moment with clients in an embodied way when these experiences happen. More research might ascertain whether the therapists also have longings for oneness states leading them to either be more open to these experiences or to interpret them in ways which might not stand up to closer scrutiny. It may be that people who want to believe such things are 'true' are the ones who are most likely to experience them. However this does not necessarily make them into fantasies.

Experiences of seeing semi-transparent, still or moving, forms or hearing voices create even more worry within the psychotherapeutic community because they are associated with hallucination and psychosis. Indeed it is a serious question as to whether some of the experiences are hallucinatory or psychotic and, if they are not, how they differ. However, the fact that therapists and counsellors of repute, in the community experience these things means we need to think about them carefully before quickly dismissing them as psychotic. It may also be that 'psychotic' experiences are common in many people. In shamanistic cultures, for instance, someone who would be thought of as mad in western culture may play a very important function as a bridge between the 'spirit world' and the ordinary

world. Within the Maori community too it is traditionally well respected leaders (tohunga) who have the power to see and prophesise the future through dreams and makakite. For many Maori, experiences of communication with 'spirit forms' are lived experiences of the Maori worldview that the wairua of ancestors both dwell within the living and visit living people, often communicating through a medium (Orbell, 1995:85).

For them, this is not just an interpretation but also a living phenomenological reality.

Both Pakeha and Maori are reluctant to speak of their experiences as real perceptions as they fear this may create concern about their sanity. In order to be able to make both better use of the experiences and understand them we need to create an environment such that there is more openness to other interpretations of such experiences.

- Is there an intelligent higher mind / being which actively communicates with us?

Within psychoanalysis, belief in a greater spiritual being tends to be interpreted as a displacement of an infantile need for an idealized figure or a defensive fantasy, created to keep away the awareness of isolation, insignificance or death. Seeing a 'spirit' presence is likely to be interpreted as a projection of an internal image, or a hallucination and believing such things are 'real', a sign of psychosis. Beginning with Freud's desire to define psychoanalysis as a science as distinct from the religion of his time, spirituality has not found a recognized place within psychoanalytic theory. Although they may be recognized as a human need or right, both spiritual experiences and beliefs are often associated within regressive longings and primitive states of mind. From a phenomenological point of view, the experiences have characteristics that lead people to interpret them as being from an intelligent and active spiritual entity. Not only do they seem to have a life of their own but they convey complex, symbolic information that, as Jung says; we cannot ascribe to our own powers.

The word of God comes to us and we have no way of distinguishing whether and to what extent it is different from God. It is not affected by the creation of our will. Our chief feeling about it is that it is not the result of our own ratiocinations, but that it came to us from elsewhere and if we have precognitive dreams how can we possibly ascribe them to our own powers (1963:313-314).

Although we cannot know if these experiences are the word of God, perhaps we might say that it is a phenomenological 'lived reality' that we relate to

inexplicable knowings as if they come from a living intelligent other. The desire to conceptualise our experience leads us to create metaphors to explain and make sense of our experiences.

- Are the boundaries of the mind/psyche actually different than those of the body?

Many therapists speak of being in a 'merger' with their client or as if they are literally experiencing another's emotional state. This may be informed by the way that Winnicott speaks of a mother and baby being at one. He says, "two separate people can feel at one but here at the place I am examining the baby and the object are one" (Winnicott, 1980:94). Although, it is not clear what he means by this, this literalism informs the way his ideas are used in common language. In a different way Jung also suggests that the boundaries of the body may not be identical with those of the psyche:

It may well be a prejudice to restrict the psyche to being 'inside the body'. In so far as the psyche has a non-spatial aspect, there may be a psychic 'outside the body', a region so utterly different from 'my' psychic space that one has to get outside oneself or make use of some auxiliary technique to get there (Schwartz-Salant, 1998:81).

Jung is not speaking of the psyche as being literally outside the body in a spatial sense, but of the psyche as having a non-spatial aspect in the same way as he speaks of the unconscious. These ideas express the difficulty in describing something as ineffable as the lived experience of loss of boundaries between fantasy and reality, self and other, without using spatial concepts. More recently analysts like Thomas Ogden are moving toward a phenomenological way of speaking of 'mind' as something that is co-created in relationship. He suggests that, "it is no longer self-evident what we mean when we speak of the analyst's or patient's "own" feelings or even the patient's "own" dreams and dream associations" (2001:20). Although he is not addressing the sorts of inexplicable knowings I am writing about, much of Ogden's writing echoes the participant's descriptions of their experiences. For instance, Ogden (2000) says the analytic third may "take on a life of its own in the interpersonal field between the analyst and the patient". This may take the form of unconscious "acting out on the part of the therapist". He also speaks of the analytic third as having intentions. The "intention", he says, may be to heal or, indeed, it may have a pathological form e.g. it may have the capacity "to hold the analytic pair hostage" and prevent thinking (Ogden, 2000:491). In this way he speaks of this co-created unconscious as intelligent and intentional. He also appears to experience himself as a medium for 'something', which comes through him, much as the participants did. He quotes poet A.R.

Ammons who he says can better convey this:

not so much looking for the shape
As being available
To any shape that may
Summon itself
Through me
from the self not mine but ours
(Poetics, 1986:61.)

Ogden speaks of the differentiation between an analyst's and patient's experience and dreams as "no longer self-evident" but also refers to the analytic third as a "being coopted by the intensity of the shared unconscious fantasy/somatic delusion in which we were both enmeshed" (2000:89). In defining these experiences as fantasies, as opposed to reality, he seems to return to the Cartesian dualistic worldview, away from an interpretive co-created one and in so doing diminishes the realness, significance and the remarkableness of the experiences. These same confusions seem to occur throughout the theoretical language, as well as the common language used by psychotherapists. This may be because the philosophical assumptions on which psychotherapeutic theories are based are not well thought out.

- Do different laws of time and space apply when we enter different states?

The most remarkable thing about these experiences is that when therapists allow themselves to enter into states in which the barrier between themselves and world becomes less distinct, it seems possible to know or see things that it would not usually be possible to perceive. It is as if the bounds of time and space really can be traversed. This is reminiscent of quantum non-locality. Quantum physics describes electrons as being sensitive, not only to their own wave packet but also to information latent in the whole system, the movements of other electrons, and even the experimenter's intentions.

Information seems to pass between electrons without a transmission of energy and does not involve fields extended in space. Is it possible that, much as Einstein concluded about gravity, that no force or energetic exchange is necessary because it is a result of a warp in space-time? Although we need to be wary of taking these parallels as more than metaphors, they can enable us to be open to the possibility that, in states in which we experience ourselves as being in space-time, non-local effects may be created. A quantum explanation neither involves the

philosophical problems of disembodied knowledge and mind, or the passage of information through space, as in fields.

- What has love got to do with it?

Although these experiences often appeared as a receiving of ‘information’ they sometimes seemed to be an embodied response to a client’s need. All the therapists describe the experiences leading to a deeper and profound of emotional connection with their clients and a sense of knowing them in a way which was more than just a knowing about. They were also very profound for the clients involved. It was as if the therapists’ care and love for their clients had opened them up to them on a different level.

Sheldrake’s research on nursing mothers discovered that “Mothers who are miles away from their babies can have a documented “let down” reflex at the precise moment of an unexpected and non-hunger based cry of their infants” (Martinez, 1999:217). This is a very clear example of an embodied and loving connection between mother and baby for which there is no physical explanation.

Conclusions

These phenomena raise huge questions and few answers. The language used to describe them provides not only the context with which we can discuss and think about them but may also enable us to perceive them. Leonard says: “because the world is constituted by our common language and culture”, [it] “is requisite in order for anything to be visible to us at all” (1989:44). Perhaps the main difficulty in finding language for these phenomena is they lead us to contemplate the nature of consciousness itself. This is a daunting, if not impossible, task because: “The structure of nature may eventually be such that our processes of thought do not correspond to it sufficiently to permit us to think about it at all” (Ogden, 2001:39).

Although the experiences are not frightening per se, thinking about their meaning arouses confusion and fear because they raise questions about the nature of reality, perception and mental illness. However, these experiences also have profound emotional effects on the therapists and counsellors and their clients. Because there is little validating therapeutic, language with which to discuss them, therapists and counsellors often resort to spiritual or scientific language and this means that the therapeutic benefits of phenomena, which have potential for healing, are untapped. I believe that the lack of theoretical language is central to the difficulty in bringing these experiences into open discussion as anything other

than psychotic or fantasy experiences. Hermeneutic phenomenology has led me to recognize the heavily conceptual nature of psychoanalytic theory. There are also theoretical contradictions between secular mechanical descriptions of the dynamics of the psyche, mystical thinking, and interpretive or hermeneutic views of mind being created with context and in an embedded relationship. Although this may be due to the fact that it is a changing field, there is also considerable prejudice towards these experiences because they seem alien to the principles and Cartesian assumptions about reality, time, space mind, and consciousness and unconsciousness on which psychoanalysis is based.

Although Jung's ideas address these phenomena more directly the split between the psychodynamic and Jungian groups in New Zealand remains strong. More conversations between the two modalities could be helpful in opening up these areas. Looking at the underlying assumptions we make in the psychoanalytic worldview, in a new way, I have also come to believe that we need to become more aware of the philosophical frameworks we base our thinking on, before we are can think about these phenomena in a rigorous way. I hope my study may go some way to opening up discussion about these issues within my own community. I was heartened in this to discover that Freud had once written to a psychic researcher called Carrington in 1921 saying: "If I had my life to live over again, I should devote myself to psychical research rather than to psychoanalysis" (Jones, 1957:32).

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