

ON PSYCHOTHERAPEUTIC ATTENTION

Kathleen Riordan Speeth
Amagansett, New York

Attention of the finest quality is the fundamental instrument of the therapist. Given its basic importance, it is thus quite astonishing that so little explicit discussion of attention is to be found in the clinical literature, and so correspondingly meager is the training in attention available to would-be therapists in professional psychology programs.

Training programs do provide a conceptual framework which assumes that the candidate is already adept in the uses of attention. In addition to a great deal of psychodynamic theory, these programs promulgate technical admonitions, which differ depending upon the school involved, and yet always seem to coalesce, whatever their content, into a sort of professional conscience, inner perceptor, or judge. This inner critic may exhort the conscientious therapist to carry out such attentional maneuvers as maintaining unconditional positive regard; monitoring the countertransference; sustaining a complementary relationship; being authentic (or hidden); refraining from solving the client's problems (or solving them with well-timed, technically elegant interventions), *etc.* The typical psychotherapist enters private practice feeling ethically committed to giving attention to each client, to establishing and maintaining rapport, and to sustaining sensitive contact regardless of subject matter, emotional tone, or context. Without further training, such requirements are about as easy to follow as the exoteric "Love thy neighbor as thyself."

*attention
and
current
psychotherapy
training
programs*

Copyright © 1982 Transpersonal Institute

Psychotherapy is an undefined technique applied to unspecified problems with unpredictable outcomes. For this technique we recommend rigorous training," quips one text (Rainey, 1950). Yet this is exactly correct. It is just because psychotherapists must work in the realm of the vague and ephemeral that they need to apply themselves most diligently to the exacting art of paying attention.

*psychotherapy
training*

Attentional expertise arises in several traditions. The psychotherapeutic tradition from Freud onward may be seen as a massive undertaking designed to free the submerged, frozen, or fascinated attention of people suffering from unremembered reminiscences. Indeed, the basic attentional training offered therapists today is through personal psychotherapy. And to the degree that it is successful, therapy does render the attention available to what is happening in reality, here and now, so that the truth can be perceived and made the basis for right action.

*meditation
training*

Attentional technologies are also to be found within the sacred traditions from ancient times onward. Each of the great religions has incorporated a system of meditation with its own procedures, phases, and stages. And each meditative discipline begins with and depends upon techniques designed to tame, direct, and master human attention.

Although the aims and methods of these two traditions are different, psychotherapy and meditation have commonalities too significant to overlook. And although the clinical psychotherapy literature recognizes the need for skillful attentional deployment, only the meditative traditions systematically deliver the skills in any specific way. The following discussion is based on insights and experience derived from the practice of both traditions.

ANALYSIS OF PSYCHOTHERAPEUTIC ATTENTION

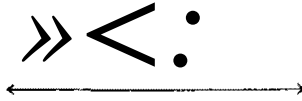
*raw
sensory
data*

All therapists, regardless of their theoretical orientation, must draw upon essentially the same raw sensory data. As a therapist I have what I can see, hear, or otherwise sense outside me (the client's words, postures, gestures, tones of voice, patterns of breathing, *etc.*), and what goes on inside me (my own proprioceptive sensations, feelings, thoughts and associations, hunches and intuitions, *etc.*). Ordinarily, my attention is simply invested, either in the outside or the inside world. To borrow from Martin Buber' (1958) and Gurdjieff (1973), it may be said that attention is divided

Ordinary attention is invested
in one direction:

But attention can be divided
between the outside and inside:

⌞
And attention can be used to
notice whether the attention is
outside or inside.



FIGURE!
THE DIVISION OF THERAPEUTIC ATTENTION
IN TERMS OF OBJECT

between I and Thou, like the double-headed arrow, as shown in Figure 1.

The therapist, however, must learn to maintain attention in both directions. Both outer and inner worlds must be sensitively known for therapy to be real therapy and not just a conversation. I notice, moment after moment, what catches my attention out there and what it brings up in me, in here. And what in the mind notices this? The attention is further divided so that what the Sufis might call a "special organ of perception" (Shah, 1964, p. 338) is formed in response to the necessity of the mind to monitor itself. This witnessing, observing consciousness notes when I am paying attention to you and when to myself. The division of attention between my own inner process and what the client is doing, saying, *etc.*, is a division according to the *object* of awareness.

*forming a
"special
organ of
perception"*

But there is another contrast to be made, this time in terms of the *kind offocus* of attention. Figure 2 shows attentional deployment in the psychotherapeutic situation, this time with the witnessing function at the apex of a triangle in which a continuum of the kind of attentional focus forms the base. The impartial observer witnesses, as if from above, how focused the therapist's attention is, moment by moment. It notices how much investment, cathexis, or fascination there is with a particular element, whether the object be inner or outer. It also notices when the attention is not caught by anything specific but instead is broadly focused on the entire panorama of experience. The base of the triangle illustrates this continuum of focus. It ranges from the narrowly focused attention that we all know when en-

*witnessing,
as if
from above*

WITNESS CONSCIOUSNESS

Awareness of
the kind of attention
the object of attention
and correlated events

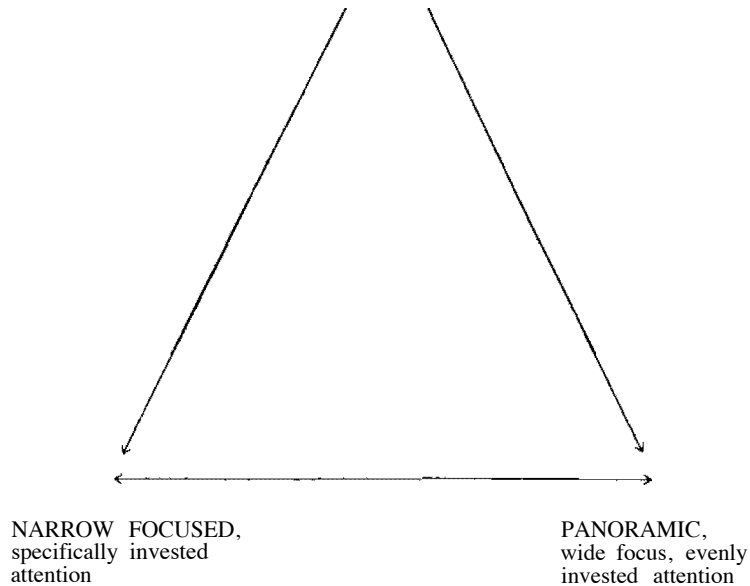


FIGURE 2
THE DIVISION OF THE RAPEUTIC ATTENTION
IN TERMS OF FOCUS

tranced with a work of art, horrified at an accident, or even lost in reading the back of a cereal box, to the freely moving, evenly invested attention that notices the broad display of characteristics that compose the full range of inner and outer experience,

fluctuating
from
inside
to
outside,
wide
to
narrow

As a psychotherapist I have a great deal of raw data with which I can fine-tune attention. There is information on what is going on outside of me and how much I am specifically focused on any particular aspect of it. There is information on what is going on inside of me and to what degree I am focused within. And there is meta-information that tells me how my attention is fluctuating from inside to outside and back again, and how the beam of my awareness is focusing narrowly or opening panoramically. Consciousness plays now on my client, now on myself. Now it is intensely caught by something, now even and free. It is the art and craft of psychotherapy to make full use of information from all these sources, detecting the forms and patterns

that exist, and rendering them available for the benefit of the client.

The arrows composing the triangles in Figures 1 and 2 are in motion. At the apex, the witness is aware of awareness. Ordinarily this part of the mind is a non-interfering observer of the fluctuating focus of attention as it flits from outside to inside, from wide to narrow, and back again. With training it can also take control, intentionally directing the attention to focus on something, to maintain steady awareness of something, to stop focusing on something, or to play evenly over a field that encompasses everything without exception. For example, when my attention is fascinated by some portion of the client's story, I might want to stop being primarily content-oriented in order to pay attention to the client's wider spectrum of expression which might include, *e.g.*: body language or tone of voice. Or I might find it necessary to withdraw some of my attention to note my own discomfort triggered by the story. With practice comes skill in shifting the focus of awareness.

*shifting
the
focus of
awareness*

The two opposites of focused and panoramic attention must be seen as more heuristic than natural categories. These elemental forms of attention, like the pure elements of chemistry, probably exist rarely, if ever, in nature. The one-pointed concentration of the stalking lion or the bandit waiting in ambush lasts only until the prey is overcome or abandoned. The normal mode of attention in sentient beings everywhere seems to be a fluctuating panoramic awareness in which focus narrows upon significant objects and then widens again.

The distinction between narrowly focused attention and panoramic awareness is also made in the traditional division of meditation techniques in Buddhism, in which the novice is typically required to learn to interfere with the normal attentional flux by intentional focus on an object and, when this is more or less mastered, is taught how to expand the awareness to encompass all and everything. Nor is the distinction relevant only to Buddhist meditation practices. It seems to have universal value in understanding the array of attentional technologies within the world's religious traditions. In a review of meditation forms, Goleman (1977) categorizes the more familiar systems according to definitions given in the Buddhist classic, the *Visuddimaggā*, into concentration methods (which are narrow focus techniques involving identification), mindfulness methods (which involve panoramic attention), and methods hybridized from both. In Table 1, which is reproduced from Goleman's

*focused
and
panoramic
meditation*

TABLE I
AN APPLIED ATTENTIONAL TYPOLOGY OF MEDITATION
TECHNIQUES

SYSTEM	TECHNIQUE	TYPE
Bhakti	Japa	Concentration
Kabbalah	Kavvanah	Concentration
Hesychasm	Prayer of the Heart	Concentration
Sufi	Zikr	Concentration
Raja Yoga	Samadhi	Concentration
Transcendental Meditation	Transcendental Meditation	Concentration
Kundalini Yoga	Siddha Yoga	Concentration
Tibetan Buddhism	Vipassana	Integrated
Zen	Zazen	Integrated
Gurdjieff	Self-remembering	Mindfulness
Krishnamurti	Self-knowledge	Mindfulness
Theravada	Vipassana	Integrated

(from Goleman, 1977)

book, we can see the basis for the contrast between, say, the *Zikr* of a Helveti dervish who chants the name of Allah in total absorption, and the self-remembering of a Gurdjieff student who undertakes to witness self and environment with impartial awareness. These two practices illustrate the polarity shown in the triangle of therapeutic attention, where the base of the triangle represents the continuum ranging from narrow to wide focus attention. The similarities that exist between the kinds of attention needed by therapists and those employed in meditation training appear to fit this model, at least in part. There have been other, more elaborate classifications of attentional processes (Naranjo & Ornstein, 1971; Speeth, 1978), but for our present purposes the ancient Buddhist contrast between narrow- and wide-beam attention will do nicely. Following the Buddhist tradition, we will begin with a consideration of the narrow-beam, tightly focused practices often described as concentration practices.

CONCENTRATION

Concentration is the fixation of attention on something to the exclusion of everything else. Typically, though not exclusively, the meditator is instructed to diligently require the wandering mind to become wholly occupied with one object, perhaps a *kasina*—a distinct colorful form like a light blue disk on a white background, or the reflection of the moon in a jar of water—or more commonly, the breath. In the Hindu practice of *trataka* the meditator gazes one-

pointedly at a candle flame until the eyes tear. In siddha yoga, the practice of *guru bhava* entails intentional identification with the spiritual teacher. The meditator systematically identifies each part of the body with the corresponding part of the guru's body: "This is my guru's right foot, this is my guru's left foot, this is my guru's right leg, this is my guru's left leg," etc. And all the religious traditions make use of concentration upon sacred syllables and formulas, from the "*Om mani padme hum*" and myriad other mantras of Tibetan Buddhism to the prayer of the heart, "Lord Jesus Christ, have mercy upon me, a sinner!"

meditation"
upon one
object

All these practices involve the effort to limit the attentional focus and keep the mind steady upon this chosen object. Regardless of their religious affiliation, practitioners of such exercises report similar experiences when the attention is successfully focused in a steady way. In some forms of Sufism, there is an effort to attend only to God, regardless of whatever else impinges, so that, as Rumi sings, "Thou and I, with no 'Thou' or 'I,' shall become one through our tasting" (in the experience of *fana*, complete absorption with God). This state of being is exemplified in this story of Rumi's, as retold by Shah (1968, p. 189).

The Beloved

One went to the door of the Beloved and knocked. A voice asked: "Who is there?" He answered: "It is I." The voice said: "There is no room here for me and thee." The door was shut.

After a year of solitude and deprivation this man returned to the door of the Beloved. He knocked. A voice from within asked: "Who is there?" The man said: "It is Thou." The door was opened for him.

In the Tibetan tradition there is a teaching story that illustrates the relationship between narrowly focused, steady attention and identification. As is so often true with the Tibetans, it is somewhat more earthy and less ethereal than the Persian mysticism so poetically transmitted by Rumi. A Tibetan teacher, so the story goes, gives his disciple the assignment to go to the cowshed and meditate upon a bull. The student goes dutifully to the barn every day to contemplate the animal. After some period of time the teacher comes for a progress check. The student reports that his attention is wavering only a little now. "Good," says the teacher, "please continue!" After another while, the student reports that his attention is fully on the bull and nothing else, all the time. The teacher prescribes still more concentration. Finally, after many, many moons, the teacher

narrow
focus
and
identification

comes for the usual ritual of evaluation. He calls through the cowshed door, asking about the student's progress in meditation. The only answer is a loud bull snort and a "Moo." Now the student has attained.

*involuntary
concentrated
focus*

We have all experienced narrowly focused and concentrated attention when it is elicited by a strong enough pull from some aspect of the environment. When a movie is sufficiently engaging we forget to eat popcorn, even lose the sense of being in a theater. Subjects under hypnosis become oblivious to background stimuli when entering trance. Those newly in love can barely think of anything else, so fascinated is the attention upon one object. It is fundamental in developmental psychology that children learn early to attend to their primary caretaker, and in fact, the orientation to the caretaker seems to entail imitative identification.

Identification is a primitive and immediate attentional focus, familiar to anyone who has ever become caught up with the feelings of a character in a movie or play. Information is perceived at least in part by the process similar to that of concentrative, narrow-focus meditations, but different from them in being involuntary, temporary, effortless, and usually unconscious. For example, in the therapeutic situation, the therapist could learn what the client is feeling, at least in part, by experiencing the changes occurring within his or her own experience while performing an "imitative identification" with that client. But how is this done *voluntarily*, and not because the object is fascinating, *i.e.*, due to our conditioning? One analyst (Greenson, 1967) describes a method thus:

*identification
through
empathy*

Empathy means to share, to experience the feelings of another human being. One partakes of the quality of the feelings, and not the quantity. Its motive, in psychoanalysis, is to gain understanding; it is not used for vicarious pleasure. It is essentially a pre-conscious phenomenon; it can be consciously instigated or interrupted; and it can occur silently and automatically, oscillating with other forms of relating with other people. The essential mechanism is a partial and temporary identification with the patient on the basis of a working model of the patient within the analyst, which he has constructed from his sum of experience with the patient

By shifting the working model of the patient into the foreground, and pushing all that is peculiarly or uniquely me into the background, I have let the patient's words and feelings enter this part of me. The model reacts with ideas, feelings, memories, or fantasies, *etc.*

Here we have a theorist of technique who explicitly employs empathy, consisting of identification that can be "consciously instigated or interrupted," implying a level of skill that, anyone who has seriously attempted to sustain a meditative focus to the point of identification will attest, is possible only with repeated, motivated efforts. It is in *voluntarily* instigating and interrupting this attentional activity that the methods and techniques of concentrative meditation might be most applicable for the psychotherapist. As for the involuntary sort of identification, this can be expected to arise from fascinating immediacies or from the therapist's countertransference (*i.e.* biases due to unfinished psychological business in the therapist's personal past; for a range of psychoanalytic explanations of identification in the countertransference, *see* Fliess, 1942; Fliess, 1952; Spitz, 1956; Reich, 1960; Kernberg, 1975).

*voluntary
control
of
attention*

Greenson indicates that in order to empathize one must hold the image or model of the other in the foreground, pushing what is oneself into the background. Presumably this is done in order that the identification that forms the basis for empathy can take place. By implication his method also suggests another key to the voluntary control of attention, a powerful method well known to masters of meditation. If I make what is "peculiarly me" foreground, the identification will stop. And what is uniquely me? My proprioceptive experience, certainly, and my thoughts and feelings and sense impressions. This is the fundamental practice given in the teaching of Gurdjieff, who saw the involuntary state of identification as the prison of mankind (Speeth, 1976). A student of Gurdjieff described this practice as follows:

Whether or not it be active in me. the possibility is given me to become aware, at certain moments, of my own presence: I, here, now. This, when I experience it, is accompanied by a strangely familiar taste, a particular sensation that might be called 'genuinely' subjective. It is quite simply, I. I recognize myself. I remember myself. In (Tracol, 1968).

Thus the interruption of identification by the therapist when it is no longer appropriate for empathy, or when it is contributing to therapeutic blocks because it is part of a counteridentification, can be effected by the practice of self-remembering, a particular form of attention in the family of mindfulness practices.

*self-
remembering*

In therapy it is vitally important to get a taste of the client's experience, to know as if from the inside what it is like to live that life. Robert Heinlein (1964) coined a new verb for

..grokking'

it: to *grok*. Grokking is a basic human way of knowing that is immediate, non-cognitive, and deeply identified. Grokking is the sort of identification with another in which we temporarily match their inner experience. Upon this base, true empathy can be built. But grokking can be involuntary when the attention is focused narrowly and steadily because of patterns of countertransference. In this situation we have a potentially dangerous analog to concentrative meditation, which, like concentrative meditation, can entail certain risks.

dangers
of
fixed
attention
techniques

It is widely known in the various meditation systems that fixed attention techniques are the most risky. In putting someone or something in the foreground while putting all that is peculiarly me in the background, and while so doing limiting the natural fluctuation of attention, I may lose touch with my own sense of self. I may become ungrounded, unbalanced, without the firm foundation of proprioception and inner mental perception that is a figured base in ordinary life. Concentration methods are thus ecstrogenic, quickly and reliably producing altered states of awareness, feelings of oceanic union, and other novel experiences that may be seized upon for their presumed significance by unbalanced minds. They may account for the majority of meditation casualties.

counter-
transference
burn-out

Countertransference may pin the therapist's attention upon one client in a manner not dissimilar to these concentrative meditations, and then similar phenomena of identification may occur, giving rise to the strange exhaustion that haunts so many people helpers, an occupational hazard currently known as "burn-out." After all, therapists not only grok, but they have to grok fellow humans who are anguished, defeated, and often at their wits' end, or at least, certainly not at their best. Thus therapists are doubly at risk: they stand a chance of losing a feeling of being securely grounded in their own being, and they are in danger of unknowingly bearing the heavy burdens of many others who are presumably less fortunate than they in terms of the sheer weight of suffering in their lives. Should countertransference glue their attention, they will be in the position of the Tibetan novice with the bull, but with an entirely different conscious intent, and with success being the limited identification that is a normal part of human empathy, not a union without boundaries.

Mastering identification in psychotherapy involves three attentional skills. First, the therapist must be able to hold the attention steady on one object so that identification can

ensue, not only when transference dictates, but voluntarily. Second, the therapist must be able to withdraw from a concentrated focus at will, so that if for some reason the attention has become fixed in an inappropriate way, it can be redirected or opened up. And third, the therapist needs the ability to let the attentional focus wax and wane without interference. This is the function of witness consciousness. It is most important technically because of the abundance of information it provides.

*three
attentional
skills*

PANORAMIC ATTENTION

One-pointed attention in which there is no felt difference between the observer and the observed, in which boundaries vanish into confluence and separate individualities blend in communion gives mystical meaning to some, and, as an ingredient in the countertransference, problems of therapeutic effectiveness to others. Panoramic attention, in which awareness is invested evenly in all things, moment after moment, has no less importance or relevance for the therapeutic setting, but adds quite another flavor. There is a feeling of impartiality, of spaciousness, of breadth of vision. One is mindful of whatever is the case, moment by moment. The idea is not to be fascinated or fixed upon anyone thing, but to allow the attention to be flexible and to stay with whatever is in the field of perception. There is no possibility of disturbance or distraction in this form of meditation because there is no attempt made to keep any object in the foreground, neither is there anything to oppose. Awareness is all-encompassing. As the ancient *Salayatana Vagga Samyutta* states:

*all-
encompassing
awareness*

"Bikkhus [monks], the all is to be fully known. What all is to be fully known? The eye is to be fully known, visual objects are to be fully known, eye-consciousness is to be fully known, eye-contact is to be fully known, that weal or woe or neutral state experienced, which arises owing to eye contact-that also is to be fully known. Ear is to be fully known, .. nose ... scent. , . tongue .. , savors ... body is to be fully known, tangibles are to be fully known. , . mimi is to be fully known, .. " (Sayadaw, 1972).

The mind's capacity to register everything impinging upon it is brought into play in this practice. Attention is panoramic. The avoidance of selection of anyone object makes it the antithesis of the practices which focus maximally. Achieving non-selective, non-preferential attention is an art in itself. Nyanaponika Thera, the great contemporary Theravadan master, put it this way:

*non-selective.
non-preferential
attention*

*bare
attention-
bare
of
labels*

Bare attention consists in the bare and exact registering of the object. It is not as easy a task as it may appear, since it is not what we normally do, except when engaged in disinterested investigation. Normally man is not concerned with disinterested knowledge of "things as they truly are" but with "handling" them and judging them from the viewpoint of his self-interest, which may be wide or narrow, noble or low. He tacks labels to the things which form his physical and mental universe, and these labels mostly show clearly the impress of his self-interest and his limited vision. It is such an assemblage of labels in which he generally lives and which determines his actions and reactions. Hence the attitude of Bare Attention-bare of labels-will open a man to a new world (Nyaponika Thera. 1962).

*choiceless
awareness*

This new world of things as they actually are is discovered through the cultivation of "choiceless awareness." This trend is rare in other religions but runs through Buddhism like a red thread connecting the original Buddhism of the Theravadan or Southern school with the continuous awareness practice of *shikan taza* in Soto Zen and even the non-practice that is called *mahamudra* at the pinnacle of Tibetan Buddhism (Chang, 1963).

Zen meditation practice is typically a composite and counterpoint of concentrative and panoramic attention, a hybrid form. One of its most eloquent proponents, Suzuki Roshi, described the process of renouncing the tendency to maneuver an object into the foreground:

*big
mind*

When you are practicing Zazen meditation, do not try to stop your thinking. Let it stop by itself. If something comes into your mind, let it come in and let it go out. It will not stay long. When you try to stop your thinking, it means you are bothered by it. Do not be bothered by anything. It appears that something comes from outside your mind, but actually it is only the waves of your mind, and if you are not bothered by the waves, gradually they will become calmer and calmer. ... Many sensations come, many thoughts or images arise, but they are just waves from your own mind.... If you leave your mind as it is, it will become calm. This mind is called big mind (Suzuki, 1970).

Freud's "basic rule" of free association is to some degree a similar practice. Compare this version with Buddhist mindfulness:

For the purpose of self-observation with concentrated attention it is advantageous that the patient should take up a restful position and close his eyes; he must be explicitly instructed to renounce all criticism of the thought formations which he may perceive. He must also be told that the success of the psychoanalysis depends upon his noting and communicating everything that passes through his mind, and that he must not

allow himself to suppress one idea because it seems to him unimportant or irrelevant to the subject, or another because it seems nonsensical. He must preserve an absolute impartiality in respect to his ideas (Freud, 1900).

Freud described the inner work of free association as the twofold effort of paying attention to the process and content of the mind and simultaneously of eliminating all criticism or censorship of what arises. The requirement for lack of censorship makes this practice akin to Buddhist mindfulness. Of course, the psychoanalytic process, especially in its emphasis on communicating to the analyst, is directed toward different ends. It is expressive and interpersonal. There is a listener, the therapist. This is in contrast to mindfulness meditation where the practice is silent, often solitary, and intrapersonal,

*Freud's
free
association*

Freud precisely defined how this method of listening was to take place, instructing the therapist that the appropriate attentional gesture

simply consists *in* making no effort to concentrate the attention on anything in particular, and in maintaining in regard to all that one hears the same measure of calm, quiet attentiveness of "evenly hovering attention," as I once before described it. In this way a strain which could not be kept up for several hours daily and a danger inseparable from deliberate attentiveness are avoided. For as soon as the attention is deliberately concentrated in a certain degree, one begins to select from the material before one; one point will be fixed in the mind with particular clearness and some other consequently disregarded, and in this selection one's expectations and one's inclinations will be followed. This is just what must not be done, however; if one's expectations are followed in this selection, there is a danger of never finding anything but what is already known, and if one follows one's inclinations, anything which is to be perceived will most certainly be falsified (Freud, (900).

*Freud's
evenly
hovering
attention*

Panoramic attention, floating free of preconceptions and heeding everything equally, is the therapist's counterpart of the patient's free association of thought. Ideally, in analysis both participants are flexibly and spontaneously noting whatever is occurring to them; one is expressive, the other receptive.

Freud blithely remarked in the first chapter of *The Interpretation of Dreams* that most patients learned how to follow the basic rule for free association the first time it was taught them. He had more than three decades of practice to modify this view, for, as everyone who has attempted to follow his or her own mind knows, there may be distractions and obstacles which can be formidable. Although he admitted

that he himself was quite expert at panoramic inner awareness of the kind we have been describing, Freud was astonished and disappointed to realize that others were not as immediately adept. He began to recommend a personal analysis for all practitioners of the psychoanalytic art in order that they might develop the ability to attend evenly and appropriately to patients. This is more obvious to therapists today who learn that widened attentiveness exists to the degree that there is no competing personal agenda (*i.e.*, countertransference) within the therapist to capture his or her attention. Suppose, for example, that the therapist is concerned and worried about whether he or she is a good enough person, intelligent enough, or whether things are happening according to a textbook sequence. Such concerns are distracting and, at the very least, preclude evenly hovering, poised attention.

*suspending
the
inner
judge*

In order to relax the focus, neither directing the mind toward a goal nor grasping at clues to solve a mystery, the therapist must at least temporarily suspend the effects of the inner judge and critic. As a situation inviting the maximum creativity in patient and therapist alike, classical psychoanalysis can be seen as two people practicing procedures which are similar, in part, to mindfulness. Here, each sensitively notices whatever is taking place, moment by moment. The client follows the basic rule of free association of thought, while the analyst "oscillates between observer and participant" (Reik, 1948); that is, between panoramic and concentrated awareness, ever mindful of where and how the attention is. Glancing back at Figure 2, it will now be clear that this is what is schematized,

*Gestalt
awareness
exercises*

There has been very little mention of attention in psychotherapy outside of the psychoanalytic tradition, although the Gestaltists are a notable exception. Anyone experienced in mindfulness meditation practices will easily recognize some counterparts in the Gestalt awareness exercises, for example, the continuum of awareness. One set of instructions from an early work is given here.

- (1) Maintain your sense of actuality—the sense that your awareness exists now and here.
- (2) Try to realize that *you* are living the experience; acting it, observing it, suffering it, resisting it.
- (3) Attend to and follow up all experiences, the "internal" as well as the "external," the abstract as well as the concrete, those that tend toward the past as well as those that tend toward the future, those that you "wish," those that you "ought," those that simply "are," those that you deliberately produce and those that seem to occur spontaneously.
- (4) With regard to every experience without exception, verbalize: "Now I am aware that ..." (Perls, Hefferline & Goodman, 1951).

That this exercise has elements which appear to parallel the mindfulness family of meditation practices is not surprising since Peds had not only the psychoanalytic lineage of Freud (Reich was his therapist), but sat Zazen meditation as well.

WITNESS CONSCIOUSNESS

If the therapist is to know when and how attention is being used, a certain amount of awareness must be withdrawn from the therapeutic interaction to watch the process. This is far from the more archaic and confluent forms of perception. As Nietzsche (1885) knew, "The thou is older than the I," which might be further translated as, we are interested in the outside world before we are interested in ourselves. The act of observing our inner world is less natural, more effortful and convoluted. When "The I observes the Me," as William James (1927) expressed it, human awareness is turned upon itself and psychological self-study begins.

*watching
the
therapeutic
process*

In real psychotherapy, as opposed to a sympathetic conversation that merely looks and sounds like psychotherapy, the therapist sustains the inner stance of impartial observation, as if from outside the interaction, or above. While allowing most of the attention to play freely upon what the client is saying and doing, and what associations I have to it, how interested I am and how empathetic, I reserve just a little attention to notice all this flux. I allow my attention to play freely or to zoom into deep identification, yet I sustain a bit of myself above it. When I am immersed I watch my almost total immersion; when I am engaged in evenly hovering attention I watch that.

*impartial
observation*

The ability to sustain such attention is acquired by skilled efforts of will, according to James (1927, p. 95), and "the longer one does attend to a topic the more mastery of it one has. And the faculty of bringing back a wandering attention over and over again is the very root of judgment, character, and will. No one is *compos sui* if he have it not. An education which should improve this faculty would be *the* education *par excellence*. "

THERAPEUTIC ATTENTION APPLIED

We have now had an introduction to concentrated, focused attention; panoramic mindfulness; and the sustained impartial witnessing of attentional flux that observes the play of consciousness as if from the zenith. We can therefore consider problems of using these forms of attention in actual practice.

Attending to What Is Outside

Concentrating on what is outside is the basis of identification; being mindful of what is outside is panoramic attention to outside events. In order to use the capacity for identification to its fullest extent, the therapist must be willing to participate deeply in the experience of another human being. Putting oneself in another person's shoes involves the ability to permit confluence to happen and in so doing to be temporarily absorbed, allowing all that is peculiarly me to recede into the background.

*the
ability
to tolerate
regression*

Certainly the individual pattern of character and level of personality organization will affect the depth of identification a therapist can experience. But a more serious impediment can be an insufficient capacity for regression. In order to allow regression into archaic forms of thinking and feeling, one must feel confident in domains beneath the rational strata of the mind. Perhaps only good mothering can provide a person with the wherewithal to make the dive into primary process, or perhaps courageous contact with deep truths about oneself is quite enough. In any case, without the ability to tolerate regression, protective mechanisms within the psyche may effectively prevent full empathy.

*the
ability
to withdraw
emotionally*

Those who are unable to break the bond of identification may be worn down by the burdens of others, losing effectiveness, sensitivity, and zest. Part of the problem may be the therapist's superego that dictates a caring and concerned attitude at all times and implies that it is superficial, over-technical, or downright mean to voluntarily redirect one's attention toward one's inner world. The requirement so often found in humanistically oriented programs that the therapist must maintain a warm, caring stance may cause a reverse reaction. Knowing how to voluntarily connect or withdraw emotionally can provide the self-pacing skill necessary to go deep with another, and most particularly with another who suffers.

*being
free from
theory*

To attend fully to what is outside in a mindful, nonidentified way, one must, first of all, be relatively aware of one's *own* theoretical admonitions. Although some theoretical orientation is necessary to organize impressions and data, the therapist has to be sufficiently free from the compulsions of theory so that all information can be considered more or less equally. Otherwise, attention may be caught by what *should* be relevant to the problem and much goes by unnoticed. To believe unreservedly in the truth of a theory is to risk discovering exactly or approximately what one expected. For

the client, the danger lies in detecting and producing just what a person who is seen as an authority (the therapist) seems to want. This is a commonly observed effect in psychotherapy: Freudian analysts report that their analysands have dreams about caves and projectiles; Jungians report that *theirs* produce dreams about wise old women and mandalas. Reinforcement theory would possibly account for the phenomenon, since a little "uh huh" or other minor affirmative expression demonstrably increases the probability of any word or behavior on which it is contingent (Green-spoon, 1955). The Freudian may hear one key word, the Jungian another-and both show, by the subtlest changes in posture, breathing, or facial expression that they are especially interested. Clearly, unassimilated preconceptions are a hindrance in the use of attention in clinical work.

The notion of maintaining complementariness in the relationship between therapist and client is relevant here. As Haley (1963) pointed out, it is necessary for effective therapy that the therapist be in an emotionally independent position with respect to the client. Certainly maintaining an observing, open attention is prerequisite to a complementary relationship. Further, maintaining even attention regardless of content permits the client to express negativities, talk about taboo issues, and report unpleasant reactions to the therapeutic situation that would be hidden if the therapist showed by the subtlest of reinforcing communications that these topics were hurtful or unwelcome. That the therapist can allow the client great freedom of expression, is illustrated by the case of Pietro, presented by Erickson (Erickson & Rossi, 1979), who permits and encourages months of twice-weekly insults from a client, his graceful acceptance finally effecting a successful therapeutic outcome. Such skill in letting the attention hover evenly while being the object of negative (or positive) transference reactions is attained not through heroic acts of self-control, but through an understanding of the nature of transference and resistance in the human predicament.

*maintaining
emotional
independenee*

Attending to What Is Inside

To become deeply absorbed with the contents of my own mind I must have considerable self-acceptance. In a situation where I am being paid to attend to another, how can I in good faith attend to myself? Of course, what is actually called for in the therapeutic situation is sensitive attention to everything, including deep feelings that arise in the therapist. Paying attention to myself, even to the degree of being immersed for a while in my own inner process, in-

*paying
attention
to
oneself*

volves a tolerance for being in the foreground. This may prove difficult because of the therapist's superego described earlier, and it may also be difficult because of characterological biases requiring the therapist to stay in the background.

Related to the issue of allowing myself to feel strongly while functioning as a therapist is the question of how and whether these feelings are manifested. Effective therapy requires both the ability to feel deeply and give those feelings no expression at all, as well as the ability to feel deeply and express it genuinely and spontaneously. In fact, Rogers (1951) and others have recommended theater training for therapists, who need to develop these subtle skills.

But not all inner attention is of this concentrative, specifically focused kind. To be mindful of inner process without becoming immersed in anyone aspect, the therapist must be able to acknowledge whatever arises in the mind without editing, judging, or getting unduly alarmed. In actual practice, an appropriate method might be to hold myself in unconditional positive regard, *i.e.*, truly without conditions, so that whatever arises from the depths of me will not jeopardize my sense of worth and goodness. This necessarily applies to anything: memories of forbidden acts and ideas, trivial tunes, fragments of experience that might better be forgotten, sexual, aggressive, or unethical fantasies, private associations that are shocking-anything. To the degree self-acceptance is present, attention can range freely over the contents of the mind allowing whatever is there to bubble up in reaction to the ever-changing situation. Within those bubbles are very often found the keys to the mysteries human beings bring to therapy. All depth psychotherapy is presumably conducted with the ideal of some sort of unconditional positive regard for the client, but what is not often said is that the therapist's unconditional positive regard for his or her own inner life is a wholesome and necessary component of therapy as well.

Attending to the Kind of Attention Being Used

In order to correctly perceive just how my attention is being used at any moment, I must, first of all, be able to tell the difference between the inner sensation of focused, invested attention and that of panoramic, impartial attention. I must have experienced both to do this. And I must have comprehended what was happening when I did. With regard to attending to my attention when it is concentrated, there is a seeming paradox. How can I watch myself when I am totally absorbed in something about myself or my client? The answer is that I cannot. I have, therefore, at least two choices:

I can renounce full investment, retaining just enough consciousness to notice how and with what I am identified, or I can renounce knowing exactly what is happening during intense emotional investment, "coming to" again and realizing in retrospect that for a moment I had been "swept away." Personal preferences in this matter will probably be based on each individual's character structure. On the other hand, noticing when I am using panoramic, evenly hovering attention is much easier. There is no pull of fascination to work against the act of self-observation. I simply experience my mind softly registering whatever occurs, within and without.

To tolerate full awareness of my degree of focus or freedom of attention, I must be relatively independent of self-criticism. When my attention is deeply invested, or as soon as I realize that it was, then there is no point in placing a value judgment on that event, even though parents, professors, supervisors, or gurus might disapprove of that identification at that time. More is to be learned by bare attention. In the same way, it will be more helpful to my client and myself when I notice that my attention is wandering inadvertently if I simply note the fact and do not add evaluation to the event.

*free
from
self:
criticism*

The therapist who is thoroughly conversant with both narrow focus and panoramic modes of attention will be able to move from one to the other at will—a skill required of every psychoanalyst who practices according to Freud's indications, but equally important for other therapists as well. It is here that meditation practice can be relevant, although of course there is a psychodynamic aspect too. To be willing to withdraw a little attention from what I am doing and thinking to monitor the process, I must have somehow reduced the need to be immersed in my life experience. [I must have lost some of the addiction to the thrills of identification, and awakened a little from the dream in which most of life is conducted.

REFERENCES

- BUBER, M. *I and Thou*. New York: Scribners, 1958.
CHANG, G. *Teachings of Tibetan yoga*. New Hyde Park, N.Y.: University Books, 1963.
ERICKSON, M. & ROSSI, E. *Hypnotherapy*. New York: Wiley, 1979.
FLIESS, R. "The metapsychology of the analyst." *Psychoanal. Quart.*, 1942, 211-27.
FLIESS, R. "Countertransferences and counteridentification." *J. Am. Psychoanal. Assoc.*, 1952, I, 268-84.

- FREUD, S. *The interpretation of dreams*, (1900) Standard Edition. London: Hogarth Press, 1955.
- GOLEMAN, D. *The varieties of the meditative experience*. New York: Irvington, 1977.
- GREENSON, R. *The technique and practice of psychoanalysis*, New York: Intl, Universities Press, 1967.
- GREENSPOON, J. The reinforcing effects of two spoken sounds 011 the frequency of two responses. *Amer. J. Psycho!* .. 1955,68,
- GURDJIEFF, G. *Views from the real world: Early talks with Gurdjieff*. New York: Dutton, 1973.
- HALEY, J. *Strategies of psychotherapy*, New York: Grune & Stratton, 1963.
- HEINLEIN, R. *Stranger in a strange land*. New York: Putnam, 1961.
- JAMES, W. *Principles of psychology*. New York: Henry Holt, 1927.
- KERN BERG, O. *Borderline conditions and pathological narcissism*. New York: Aronson, 1975.
- NARANJO, C. & ORNSTEIN, R. *011 the psychology of meditation*. New York: Viking, 1971.
- NIETZSCHE, F. *Thus spoke Zarathustra*, (1885) New York: Penguin, 1961.
- NYAPONIKA, THERA. *The heart of Buddhist meditation*. New York: Weiser, 1962.
- PERLS, F., HEFFERLINE, R. & GOODMAN, P. *Gestalt therapy*. New York: Julian Press, 1951.
- RAINEY, C. (Ed.). *Training in clinical psychology*, New York: Prentice Hall, 1950.
- REICH, A. "Further remarks on countertransference." *Int. J. Psychoanal.*, 1960, 41,
- REIK, T. *Listening with the third ear*. New York: Grove Press, 1948.
- ROGERS, C. *Client-centered therapy*. Boston: Houghton Mifflin, 1951.
- SAYADAW, M. *Practical insight meditation* (Series 2). San Francisco: Unity Press, 1972.
- SHAH, L *The Sufis*. Garden City, N.Y.: Doubleday, 1964.
- SHAH, L *The way of the Sufi*. London: Jonathan Cape, 1968.
- SPEETH, K. *The Gurdjieff work*. Berkeley: And/Or Press, 1976.
- SPEETH, K. On the healing potential of meditation. In *Holistic health handbook*. Berkeley: And/Or Press, 1978.
- SPITZ, R. "Countertransference: Comments on its varying role in the analytic situation." *J. Am. Psychoanal. Assoc.*, 1956,4, 256-65.
- SUZUKI, D. *Zen mind, beginner's mind*. New York: Weatherhill, 1970,
- TRACOL, H. *George Ivanovitch Gurdjieff: Man's awakening and the practice of remembering oneself*, Bray: Guild Press, 1968.

Requests for reprints to Kathleen Riordan Speeth, Box 1106, Amagansett, New York 11930.