Psychotherapy Guidebook

Natural High Therapy

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DEFINITION

Natural High Therapy is a here-and-now optimistic behaviorally oriented therapy designed to teach about chronic and crucial constrictions of self-esteem (feelings of worth and significance) and social interest (feelings of similarity with others and belonging in the universe). The two variables of self-esteem (SE) and social interest (SI) are the only two qualities over which persons have absolute control, but only actualizers have learned to be aware of this basic truth. Only those individuals who are alerted to this phenomenon are in control of its growth benefits.

People spend most of their time and energy unwittingly attempting to overcompensate for the damage precipitated by continuous invidious comparisons, creatively arranged in the service of protecting learned and cherished identities or life-styles. Only actualized life-styles are not constrictive. Discouraged life-styles represent both irrational demands and negative nonsense, which narrow the inner . and outer movements of SI. On the cognitive and behavioral dimensions, isolated monadic behavior is fostered rather than dyadic other-concerned movements. All humans need and get power (or influence). Such idiosyncratic inner and outer movement is stabilized by the life-style constrictions. Persons may develop tremendous power with little SE. Such are considered our problem people: the lower the SE, the more the need for psychiatric hospitalization.

A natural high experience follows from ceasing one's constrictive efforts, halting devaluations of self and others. When one's goals and roles are truly realized one may feel unique, similar, and significant. This state is the natural high. The supernatural high, feeling one's innate worth and inherent connectedness without the need for external proof, is the ultimate goal of Natural High Therapy.

HISTORY

Natural High Therapy is the product of my (Walter E. O'Connell) work in the mental health field in the last twenty-five years. Natural High Therapy is the only psychotherapy to develop out of humor studies. The growth of the humorous attitude toward life still remains the hallmark of the super-natural high.

Since the 1950s I have been both borrowing and inventing concepts and techniques to teach man that he is an active agent (hence, response-able) and not the passive victim of past, present, and future circumstances that he yearns to be. Natural high methodology has-always been wary of iatrogenic "illness" (types of discouragement introjected from cynical authorities). Hence, man should learn and practice a theory that "makes sense," is selfreflexive (and so can "explain" his own constrictions), and must be practiced like any other skill or sport.

Early clinical papers described positive goal states of therapy, another area of psychiatry so often neglected in our emphases on pathology and the externals of counting, weighing, and measuring. In 1963 references to psychodrama were relabeled as "action therapy" because my colleagues and I were not Moreno trained and were concerned with goals, self-induced constrictions, and the movements of encouragement, beyond catharsis itself. Action therapy became the chief vehicle of Level I (self-constriction). My experience as researcher on a patients' training lab ward, using Lewinian theory, led me to incorporate the didactic-experiential methods to Level II (learning dyadic encouragement through practice). Level III (the Transpersonal) relies on meditation, contemplation, guided imagery, and Jungian active imagination. A vital premise of the natural high theory is that levels must be mastered sequentially. Problems of hyperdependency, active and passive competition, and human ignorance, unless learned from Level I and II training, block the efforts needed to actualize the deep, inner potentials. Since 1972 the focus on humanistic identification has undergone a semantic change. Research, training, and therapy with drug addicts has led to a less abstract and more motivational term, the Natural High. Throughout the

history of the democratic optimistic educational venture there is an indebtedness principally to Alfred Adler and Rudolf Dreikurs for the insights of Individual (Adlerian) psychology. Other informal teachers from various schools of therapy were C. G. Jung, Kurt Lewin, Abraham Maslow, Albert Ellis, J. L. Moreno, and Ira Progoff. I consider Natural High Therapy to be part of a tradition, exemplified by the works of the before-mentioned therapists, called humanistic depth psychology. The thrust of that endeavor is on self-training for self-actualization, with constant concern for contributions to SI growth.

Some therapists have suggested that Natural High Therapy be placed under the rubric of neo-Adlerian therapy. Such a switch is impossible since there is no Adlerian change of emphasis that would negate earlier works of Adlerian psychologists. What Natural High Therapy does is to expand the usual Adlerian work on the social dimension to phenomenological and transpersonal facets also. The community goals beyond the typical doctorpatient interactions are highlighted. Adlerian concepts are interrelated and translated into behavior in the natural high theory. Positive personality goals can be reached via self-education in Natural High Therapy. The latter radically expands Adlerian theory and practice but does not clash with its basic SI tenets.

TECHNIQUE

Natural High Therapy uses a great variety of techniques to teach response-ability: that persons can and must take responsibility for SE and SI enhancement, without blame, punishment, and individious comparisons. Action therapy has been a resource of Level I where people experience their constrictive cycles. From inadequate SE and SI comes the "demandments," the I-must and You-must of controls, goals, and roles ingrained early in life. From demandments come frustration, and the subsequent blame of negative nonsense. People blame self, others or life. We are so creative that we arrange, provoke, and selectively find "reasons" and proof for our deadly blamegames. Then comes misery.

Level II spells out in action the encouragenic movements. For example to be a healthful significant other we must practice stop, look, and listen; paraphrasing and guessing at feelings; interested postures; self-disclosure; the movements of basic feedback; telling others how they could encourage us and guessing at how we could do so to them; not rewarding useless goals or seeking them ourselves; and, of course, learning to develop and use the sense of humor. Level II fits Adler's implications about courage as being active social interest. Encouragement is difficult because in its essence it doesn't focus on externals or a perma-smile approach to pathology. Encouragement means teaching ourselves and others that we and we alone constrict our worth and belonging no matter how discouraging the environment. The teaching of the encouragement process was modeled on didacticexperiential interactions, using group feedback as vehicles for learning the Lewinian model. Natural high goes beyond simple feedback of feelings into a feedback on goals, or "how" and "why" people, usually without awareness, chronically constrict themselves, then sicken with blame, our chief social disease. Natural high focuses on persons rather than techniques and says in effect that unless teachers and therapists learn to become soul-makers to themselves, they will continue to misuse techniques.

Level III is radically different from the preceding individual emphasis; it is the experiencing of ideas in which man becomes more than just a replaceable object in a callous, static universe. Teilhard de Chardin saw love as creating radial energy for universal evolution. Carl Jung saw man as responsible for the acceptance and expansion of the pattern of universal synchronicity and self-actualization of the God within.

Meditation, contemplation, active imagination, and guided imagery can all be in the service of developing ultimate athletes in the game-of-games: those who know that, together with all others, they are response-able for creation of their supernatural highs, and for contributing to such growth in others.

Like encouragement process, Level I (action therapy) and Level III

(guided imagery) later played a part in the didactic-experiential focus on death. At the request of the Veterans Administration, my colleagues and I created death and dying labs (once again based upon the encouragement model of Level II) for thousands of professionals. Initially, these methods were employed to desensitize death fears in those who worked close with terminal patients. I later discovered that such simulated experiences of death can become actualizers for anyone. Death labs accentuated feelings of SI and help people to look at where their true strength (SE and SI) and power (Level II encouragement) were centered. I then formulated the natural low: a sense of compassion toward others and a mourning of our own deaths catalyzed by death and dying labs. The natural low complements the natural high and both are needed for actualization.

APPLICATIONS

Throughout its evolution, Natural High Therapy has been taught and demonstrated to groups of every possible classification: psychiatric, educational, business-industrial, and religious. The psychosocial tenets of love-self, love-neighbor, and love-God (Levels I, II, and III) are discovered and practiced in terms of human movements and purposive goals. The incorporation of the spirit and techniques of Adler and Dreikurs within the natural high practice makes the latter appropriate for the reeducation toward democratic principles through home and class councils. Both Dreikurs and Adler aimed beyond the doctor-patient model to the teaching of the community through positive principles. Such is the fond hope — and practical application — of Natural High Therapy also.

The Institute for Creative Community Living (ICCL) at the University of St. Thomas, Houston, focuses on tutoring in ego-interpersonal and selfactualization. College credit and certification is offered for natural high coursework within the Adlerian frame of reference. At ICCL, education is above all for self-realization rather than to prepare professionals narrowly in.the orthodox disease model.