When the volcano erupts - A journey homewards

"Below decks there is a constant flurry of activity as hormones spill into the system: body heat goes up, white cells scurry to and fro, and brain cells are recruiting supporting cells in the service of repression. Alas, the alarm is silent and no one is there to hear it. The alarm chimes and screams yet we are deaf. The guts are screaming while we go around with a beatific smile as if all were right with the world, or we are so busy with business deals that we ignore a disaster in the making. That disaster can spell the end of our lives”.

A. Janov (The Biology of Love)

Janov is describing above the covert physical experience of primal overload in an individual. On the surface the person appears to be calm and collected, high functioning, and seemingly living a ‘normal busy life’, completely unaware of the threat below. So what happens when our guts can no longer hold in the scream; when this overload begins to spill out its guts; when our beatific smiles turn into hellish piercing cries, and the rumbling human volcano literally erupts into a deluge of burning hot emotional lava?

Using illustrations and images, I would like to refer to two aspects of this eruption; one from the primal perspective and the other from a transpersonal perspective.
Often described as Primal Flooding or Spiritual Emergency; how can we as primal integration facilitators recognise when this is happening in our clients and how can we differentiate between what might appear to be psychological and what might be described as spiritual; or do we actually need to differentiate?

**Primal Perspective.**

**First, Second and Third Levels of Consciousness and neurological development.**

Neurologist Paul MacLean describes the triune brain; that our skull holds not one brain, but three. Equivalent to an archaeological site, each layer represents a distinct evolutionary stratum that has formed upon the older layer before it; See Fig. 1 below. Primal Therapist Arthur Janov uses the term levels of consciousness to refer to these parts of the brain as the starting points where pain develops. He simply names these areas of the brain as First, Second and Third levels. I include diagrams based on Janov’s descriptions of these three levels and compare them with Abraham Maslow’s Pyramid - Hierarchy of Needs which illustrates our basic human needs. See. Figs. 2 & 3.

- Archipallium brain (reptilian brain)
- Palleomammalian brain (limbic system)
- Neopallium brain (neocortex)

Fig. 1
First Level. Situated at the base of the brain, the brainstem or Reptilian brain begins to develop from conception up to about six months. Our neural transmitters are the means by which we can repress the pain that we experience during this critical period. Our bodies are our only means of experiencing sensation. Later in adulthood, when we experience first line pain, we often present as clients with chronic physical symptoms. These can include symptoms such as irregular heartbeat, high or low blood pressure, asthma, ulcerative colitis, migraines, etc. and even full blown suicidal feelings; All of which can arise from our unconscious; from our reptilian brain stem. Babies very often defend from their pain during this critical period by excessive sleeping. How many times, do we hear, “Oh she is such a quiet baby – she’s no problem at all.” The primary way the baby can defend herself at this level is with her body. Sleeping can be a very powerful survival tool.

Second level. The limbic system, which is the next level, continues to develop until we are about 24 months old. Then it is set for life. Pain at this level is defended by
our acting out. “I don’t need anyone, I can do it myself”. Big boys don’t cry, little girls become rebels; and dissociation occurs. As soon as the pain at this level gets close to consciousness the brain switches off, endorphins are released and serotonin increases. We try to create a utopia in excessive creativity. We can escape into religious ideation; creating our own perfect Santa Clauses to protect us from our pain; keeping the cap on the smoldering seething lava.

- **Third level.** Here at this level, we deal with current issues, current pain. Situated at the upper frontal area of the brain, it is called the Neo-Cortex, and it begins to develop when we are about three years old and ceases usually at about age 18. The third level is only a very small part of you. (see tip of pyramid)

The roots of our pain are in the all three levels. One of the most powerful experiences of pain is our birth, (see green area first line) which most of us, are still acting out of, thus the beginnings of all the false selves which we create throughout our lives to avoid our original pain. We block over and over again.

Referring to Maslow’s pyramid, Janov’s third line pain (Fig.2, tip of pyramid – coloured blue) is represented by the corresponding area coloured blue, (Fig. 3) and is pain and loss which we feel in our current life. As Maslow suggests, it is based around our need for realising our inner potentials, and experiencing loss of meaning; the need for self actualization. When these are not met, we experience pain. Second line pain for Maslow (Fig. 3 area coloured green) occurs when we don’t feel needed, are ignored, unloved, unappreciated as children; needing to be seen, and loved. Maslow shows First line pain (Fig 3, coloured red and orange) as representing our most basic needs for survival; instinctual needs, food, warmth, safety, security. The feelings around these needs are of life and death proportions. The tip of Maslow’s pyramid of hierarchy of needs has no corresponding reference point with Janov’s interpretations of consciousness.

**Primal Overload**
Overload can be triggered by pain at any of the three levels; i.e. crises in our lives; the death of a loved one, loss of job, serious illness, see Fig. 4 below.

Third line overload. We can be completely thrown by a crisis in the present, i.e. the death of a spouse, the loss of a job or career, a divorce. In fact, any serious loss, bullying, moving house, surgery, a serious illness. But the key thing to note in overload is that often the feelings are disproportionate to the event. “I am going to die” “Nobody knows that I am dying here, something’s trying to kill me” These are not current feelings but are triggered by current issues. Current feelings would sound like “I feel so lonely now that my husband has gone,” not feelings of death and destruction as “My husband is gone and I want to die, please let me die”

Second Line Overload. Triggered by painful experiences of childhood such as neglect, or abandonment; ignored by parents, never seen or heard, thus creating the lonely child. No experience of bonding with mother or father, having to grow up too early, living in a household where expression of feelings is not permitted. This is like living in a desert.
First Line Overload. The causes of first line pain are frequently as follows; traumatic birth, separation from the mother, incubation for a period of time, no skin contact, invasive surgery. (e.g. circumcision) babies left alone after birth, with no bonding or attachment – (the baby has been inside the mother for nine months, hearing her heartbeat, perhaps held safely, and now suddenly is under strong lights, left alone in a crib or incubator, no touch, no protection). The mother could have been on non-prescription drugs resulting in babies born with agonizing withdrawal symptoms.

Other frequent causes of first line pain are: Cases of breach birth, (often the doctor will rotate the baby over and over to try to create a ‘normal birth’) Anoxia (deprivation of oxygen); the feeling of dying in the birth canal-strangled by umbilical chord. Anaesthetisation of the mother which the baby ingests and nearly dies in the process. Use of Epidural - again, increasing intake of dangerous chemicals into the baby’s bloodstream and nervous system).

The list is endless. The child grows up and when he/she becomes an adult may suffer from numerous chronic ailments; eating disorders, migraines, high or low blood pressure, asthma, shallow breathing, constant living in terror, terror of dying - terror of living.

Spiritual Perspective

“The experience of spiritual emergency is like a birth pang in which you yourself go through to a fuller life, a deeper life, in which some areas in your life that were not yet encompassed by this fullness of life are now challenged to be integrated....Breakthroughs are often very painful, often acute and dramatic
Janov describes three levels of consciousness within the human brain from a neurological and primal perspective. Here I will offer another level of consciousness from a spiritual or transpersonal viewpoint, which transcends and includes Janov’s three levels. And unlike Janov’s limited theory which focuses upon pre-personal and personal experience, ‘transpersonal’ is that system of thinking which covers the whole spectrum of human experience including non-ordinary states of consciousness. Spiritual traditions (both Eastern and Western) refer to this as a non-biological awareness, or ‘spirit’ as the transpersonal element to the triune brain model. Often referred to as the ‘conscious’ mind. This ‘spirit’ part of us is often described as pure unbounded awareness which is fully merged with our body.

And as a result of trauma, particularly the trauma of our womb and birth experiences, (some transpersonal psychologists will also include the traumas of our many past lives), we develop energetic blocks to this awareness. These are often described as invisible layers at skin level, or ‘extra cellular matrix tissue’ which contribute to the creation of our many false selves.
In the process of our personal psychological enquiry, and/or the disciplined spiritual practice of daily meditation to try to dissolve these defensive layers, we discover that the removal of these layers permit our spirit to ‘emerge’ and to literally merge or fuse our triune brain, which had grown independent of each other as the result of our earliest traumas. The effects of this emerging spirit may become acute and dramatic as it unfolds within our psyche. This is no longer an emergence but an emergency; a crisis of volcanic proportions, in which the individual experiencing it, is struggling with a spiritual life or death situation. Often confused with acute psychosis, spiritual emergency is a natural organic healing process of re-integrating what had originally been both a spiritual and psychological disintegration.

Trauma at any age, but particularly around pre and perinatal stages can open an individual to issues of profound existential and spiritual significance. And as a result, the trauma victim will often choose the path of the mystics, shamans, mythic heroes, and become spiritual seekers (searching for their ‘spirit’ or soul). It feels to the traumatised individual, that if they don’t take this path, they will be overcome by the trauma. So this path, when opened up becomes what has often been described as the fast track to God.

“Spiritual emergence has been defined as "the movement of an individual to a more expanded way of being that involves enhanced emotional and psychosomatic health, greater freedom of personal choices, and a sense of deeper connection with others people, nature, and the cosmos - An important part of this development is an increasing awareness of the spiritual dimension in one's life and in the universal scheme of things."

(Grof & Grof 1990)

A spiritual emergency crisis may take the form of non-ordinary states of consciousness which can include the flooding of powerful primal feelings, inner visions, acute sensory changes, physical manifestations, and all are centered on spiritual themes. The terms spiritual emergence and spiritual emergency were coined by Dr Stanislav Grof and his wife Christina Grof, who have worked for many years as therapists and researchers in the field of non-ordinary awareness and personal transformation. Grof listed eight patterns which can be described as spiritual emergencies.

1. Shamanic Journey
2. Psychological Renewal through Activation of the Central Archetype
3. Psychic Opening
4. Emergence of a Karmic Pattern
5. Possession States,
6. Encounters with Extra-terrestrials (ETs)
7. The Inter-life and other Mystical Experiences.
8. Awakening of the Serpent Power (Kundalini)

I will focus on Kundalini Awakening, and its effects on our spiritual ‘chakras’ because of its similarities of physical and emotional symptoms with that of primal overload and flooding on all three levels of consciousness.

Very often the first indication of the experience of Kundalini Awakening is felt as a powerful ‘snapping’ of something at the base of the spine, where according to esoteric literature; this ‘energy’ has been described as a latent ‘snake like’ form and coiled up since our birth. As the energy is released, it begins to move up the spine exiting at the crown of the head. (See Fig. 6). This sensation can feel like a volcano, or a geyser erupting within the body; other times it can feel like a slow crawling tingling sensation winding its way up the spine and spreading around the body. As this ‘energy’ opens up various energy centres (chakras) from the base of the spine to the crown of the head, the whole body feels charged with energetic sensations, and the nervous system is often overwhelmed by intense burning, the hearing of penetrating strange sounds, and the inner seeing of bright lights.

Fig. 6.
The word chakra is simply the name for a wheel or energy centre situated within our etheric body. For my purpose of relating spiritual emergency to primal overload, I have linked the 6 chakra colours with Janov’s three levels of consciousness, and have included a fourth level; transpersonal. (see Fig. 7)

![Fig. 7.](image)

The colours of the lower chakras, i.e. red and orange correspond with Janov’s first level of consciousness. The middle two colours of yellow and green correspond with the second level of consciousness, and the upper chakras coloured blue and indigo correspond with the third level of consciousness. The crown chakra is without colour, or to be more exact contains the full spectrum of colours, thus appears as white, and refers to the transpersonal realm, and wholeness. (see Figs. 8 & 9.). When these energy centres are opened up with the rising power, the effects can range from feelings of impending death, and annihilation, through feeling unloved and ignored, through to feelings of bliss and ecstasy as the energy rises to the crown chakra. At this point there is a felt sense of the presence of something or someone ‘Other’. This mystical consciousness may be relational or non-relational in quality. Here also, the individual experiences a consciousness which is extra sensory, within normal, abnormal, altered, and mystical states.
The premature release of this latent energy can cause untold disturbances in a person’s body and psyche. These disturbances which manifest as physical symptoms are called Kriyas. They include involuntary physical jerking, shaking, vibrating as a major flood of energy comes up the body. Sometimes the body can go into spasm. There can also occur sudden swift movements of the limbs, involuntary dancing, spinning etc. The person will make involuntary sounds, such as growling or shouts. They can feel as if their whole body is plugged into an electric socket. They will experience constant tingling under the skin; nervous energy, hypertension, nausea, backache and sharp pain along the spine, headaches, or buzzing in the head, numbness in hands or feet, and electric shocks in feet, especially big toes. The experience of powerful feelings of sexual energy, including spontaneous full body orgasms is also quite common. They can feel as if their body is luminous. Spontaneous involuntary crying or screaming is always present. El Collie describes it as follows:

*This life-force is very like water pressure being increased in a hose. If the pressure is radically increased and the hose is narrow, the force of the water will make the hose whip around furiously.*

*In order for high vibration energy to flow smoothly through our systems, we need to be enlarged*
and unobstructed. This expansion and clearing takes place on many levels: physically, mentally, psychologically, and emotionally. The activated Kundalini produces kriyas when it comes up against inner blockage. This blockage may be in the form of stored physical or emotional trauma, limiting beliefs and attitudes, or psychic debris from collective toxins, past lives, astral dimensions, and other arcane sources. The externally evident kriyas, visible as uncontrolled movements of the body, signify a great inner healing process. It’s unnecessary for us to be consciously aware of the exact nature of our blockages. As these blocks are engaged, it works to dissolve them. While this dissolution is occurring, lots of previously frozen, unconscious material becomes available to us. This may arise as thoughts, physical sensations, or emotions. At this stage, we often feel physically sick and emotionally unstable. Without warning or apparent provocation, we plunge into fits of rage or chasms of grief or despair. These erratic and overwhelming feelings are simply ancient energies which were locked within us. As we begin to become empty of these trapped energies, we temporarily relive them. This also happens on the physical level. Old injuries and illnesses are temporarily re-experienced. Although it can be painful and difficult to tolerate these physical and emotional states, they are not harmful. To the contrary, they are signs of deep, forgotten, festering wounds which are at last being opened, drained, and healed. Some of the texts refer to inner blockages as “resistance.” El Collie (1995)

Avril’s Story.

Avril sits on the chair, shivering and shaking; her heart is pounding, and her blood pressure is high. Fearful of looking up and seeing my gaze, she stares at the floor and balances her trembling body on the edge of the seat, frantically wringing her hands. With her knees clench ed together, she taps her right foot on the floor; beating out the terror and despair of a lifetime; a terror which has no words; no explanation.

With her eyes cast downwards, she begins to sink deeply into a space where only she can go to for now, mumbling over and over again “Mind me, mind me”. As mucous floods into her mouth causing her to spit constantly into an endless supply of tissues,- Avril is unable to make sense of what is happening to her at this point in her life.

For over three weeks, she has stayed in her bedroom, feeling as if a million ants carrying razor blades are scraping off her skin from the inside! Every day, she cries in agony; her body arching backwards, her mouth gaping wide, and involuntary grunts and screams
spontaneously pouring out; Electrical energy is coursing through her body, and bruises appear each morning on her wrists, feet, and buttocks. She has nightly dreams of deities, and demons, of torture and impending death. Death would be preferable to living.

At her core, she says she ‘knows’ that a metamorphosis is taking place at a deep level, and she says that she feels as if she is being re-wired (her words) but there is no earth wire; she has lost her ground upon which to stand. And now she is here. As she sits in my room; with her guts spilling out, she is experiencing total collapse.

Avril who is 48 years old, has been living in a relatively happy marriage with a grown family, and currently is in her third year as a mature student training to be a humanistic integrative psychotherapist. She recently attended an osteopath for treatment for her chronic lower back pain. And at her last session, as the osteopath manipulated her musculature, she felt a ‘crack’ in her back muscles, and suddenly she was filled with terror; terror of dying; terror of living; a feeling she had never accessed before.

She had been ‘suffering’ for most of her life with biennial bouts of what her GP had diagnosed as endogenous depression, for which she had been prescribed anti-depressants and anti-anxiety medication to help her ‘cope’ with her feelings of hopelessness. When asked about her medical history, she would smile benignly and say that she has had every ‘itis’ in the medical dictionary; ulcerative colitis being the most significant. And, with no organic cause for any of these illnesses, a friend suggested that perhaps talking to someone might help with her. So, she began to attend a local psychotherapist on a weekly basis and as a result of a certain amount of relief from her suffering, and a growth in self knowledge, Avril then decided to train as a psychotherapist.

As a child she had always loved beautiful things. She was very creative both as an artist and as a musician. Every day after school, Avril would go to her room where she played her violin, accompanied by her beloved vinyl recordings of Yehudi Menuhin. She had successfully escaped into a world of classical music; a world where she could feel safe and secure. There she could become the notes on the page, the strings were her guts, and the bow was her hand, slowly stroking and comforting her body to the strains of the music.
Later, as a young woman, she became attracted to the Christian mystical journey, and she eventually found a contemplative path within which she could find rest and peace for her body and soul. And all these coping mechanisms had helped to release the millions of endorphins needed as a buffer to protect her from her hidden repressed pain. Until now!

As Avril and I sit opposite each other we begin to make eye contact. She ‘knows’ that the lifelong repression has finally lifted, although she is not aware of the extent of it. The cap on this volcano has finally blown off, and the burning molten ‘lava’ is erupting all over the place. Avril has been in overload for her whole lifetime; keeping the ‘lid on’ by escaping into beauty, and the seemingly simple experience of muscle manipulation by the osteopath, has triggered her at her third level of consciousness, and now her first line pain is gushing up into second and third line and spilling out into her everyday life. No one had recognised the physical warning signs of this overload of pain, which has now contributed to this catastrophe.

She had recently lost a friend to suicide; the grief of this loss combined with the manipulation of the osteopath has weakened her strong defences; the gates have burst open, and the burning lava of pain from all her levels of consciousness is flooding her senses. Avril is overloaded on all levels. She is now in the danger zone and is confronted with more pain than she can handle and integrate. This is overload, and she is in danger of dying!

**Support**

How can we as primal integration facilitators support a person going through this spiritual and psychological upheaval? How do we differentiate between what could be a primal overload and what could be a spontaneous Kundalini awakening? Or do we actually need to differentiate?

Janov says that primal overload, if not recognised and supported can lead to psychosis, and very often suicide. And a person in spiritual emergency if not carefully
diagnosed can be considered psychotic and end up in mental institutions, and may also commit suicide.

The symptoms of a psychosis and spiritual emergency are similar in many ways, and this can often be misleading for therapists. The significant underlying theme of a spiritual emergency is one of a journey to wholeness, and integration, not disintegration as in a psychosis. Psychosis is a journey into unreality on all levels, leading often to a permanent state of disunity and fragmentation. Spiritual emergence is a personal realization of a reality beyond ego reality, and ultimately, the experience of one’s unity with all things.

Many therapists have the skills to engage with many manifestations of the mind, but dealing with spiritual emergencies has usually been left to the ‘priesthood’ most of who are unaware of the dangers of this process. Nonetheless we as primal integration facilitators are more and more finding ourselves coming face to face with spiritual emergencies of volcanic proportions, and many facilitators are uncertain as to how to work effectively with these. We need to be able to distinguish healthy from unhealthy spirituality without exclusively pathologizing our clients’ experiences, beliefs, or their religious faiths.”

A person going through a spiritual emergency or primal overload needs to know that in the present, she is safe. The present is Avril’s access to the past, and she is already ‘in’ it. When she is in too much pain, she is defenceless against the torrent of feelings. The
‘presence’ of the primal integration facilitator is now the good container which will create safety for Avril as she spills out her pain. She needs an empathic, reflective, supportive loving listener, who will be a ‘trellis’ for her on this journey. This is key. Warmth and compassion combined with a degree of softness and gentleness are essential, as simply cold professional skills can be highly triggering to the fragile imaginings of a person undergoing these profound consciousness changes. Additionally, a certain calmness and quiet confidence will energetically reassure and soothe the apprehension and fear of the client.

John Weir Perry, MD, who founded Diabasis, a residential treatment centre for working with people in visionary psychotic states, in the 1970’s, when choosing staff said “we picked those who had qualities of empathy and ease with psychic depth and who actively encourages the process, who provides a loving appreciation of the qualities emerging through the process, and who facilitates the process rather than attempting to halt or interfere with it.” (Trials of the Visionary Mind – John Weir Perry)

Janov suggests that medication (such as mild anti-depressants) is often very helpful, as this will block some of the pain, so that process can move slowly, and each feeling felt and processed as it arises. John Weir Perry, MD, on the other hand, has argued that medication only inhibits a person’s ability to concentrate on the inner work and it mutes the psychic energy needed to sustain the effort to move the process forward. He says “When medication is used to simply repress the inner process, it becomes frozen in an unfinished state. Suppression can impede the potential for a complete working through to a point of resolution”. This is fine, as long as the client is in 24 hour care, but this is not often the case as facilities such as Diabasis are not readily available or affordable, and family situations are equally not always supportive of such a powerful upheaval in someone’s life.

A full medical check up should be recommended to rule out any organic disease, and a clinical diagnosis may often be suggested to confirm if this is a descent into a psychosis or an ascent into higher consciousness. It is a rare occasion when the facilitator has a finely tuned sense of what is psychotic, and what might be a physio-kundalini complex, and if the facilitator is not equipped to discern this, then referring the client to a transpersonal psychologist is essential. He/she will diagnose whether the client is unbalanced or whether he/she is, in fact, overwhelmed with positive transformative psychic forces.
In discerning, it is often noted that those on the psychotic side tend to be very secretive, oblique and totally preoccupied with inner dialogues that they can never quite communicate to others. The person going through the spiritual emergence is ‘open’ and has a felt ‘awareness’ that a spiritual and psychological metamorphosis is taking place (see Spiritual Emergency Grof & Grof 1990 for more on diagnosis.)

There is one particular ‘symptom’ which distinguishes a Kundalini opening with a psychosis, and that is the strong sensation in the entire body of burning heat, together with the ‘vibrations’ tingling, and itching described above; all of which very common in the ‘higher’ states, and almost never in a psychosis. The person will ‘feel’ that she might spontaneously combust at any moment; thus the volcano analogy.

I believe that primal overload can lead to a spiritual awakening as in Spontaneous Kundalini awakening, and equally, a person going through a spiritual emergency inevitably experiences the overwhelming primal flooding of repressed material from their conception, birth and childhood to the present time.
In the ‘normal’ course of events when one comes to ‘do’ primal work, we generally begin at third line pain, and slowly move downwards at the client’s pace. If we go straight to second or first line, we are bypassing our adult life. We begin to work with current feelings, such as “I feel lonely’, I feel ignored - just a little at a time, and eventually travel down to that place of “love me or I will die”. But in Avril’s situation, first line was shooting through all the levels, She, felt that she was dying. Need was where Avril needed to go to. That’s were she began and need is who she had become.

Avril, in the course of her primal integration journey uncovered a childhood filled with incest and neglect, and a birth which necessitated forceps as she was ‘stuck’ and ‘dying’ in the birth canal. These traumas had lain ‘dormant’ like the coiled snake in the pit of this volcanic mountain for her whole life, and now she was reliving the hopelessness of her near death in the birth canal. Together she and I travelled to this helpless hopeless place; this place of giving up; staying with whatever body signs appeared coughing, choking etc., allowing the anoxia of her birth to come up; to the place of this ‘original sin”; to feel the agony of her dying to its fullest. And when enough of this was discharged, over time, she slowly faced and felt the remainder of the previously repressed feelings as they travelled up to the surface.

As facilitators we must go where the client already is; down to the bottomless pit of their agony. Slowly and patiently we need to begin to help our clients to separate out their feelings, and address each one as it arises; feeling the length, depth and breadth of each feeling until it dissipates. And as they empty out the past, the present feelings become resolved. We have to be vigilant in our journeying with our clients, and be aware that all levels too can become a defence. Avril’s first line pain was always shooting up, displaying itself in her physical symptoms; rapid heart beat, high blood pressure, chronic colitis etc., and was not previously recognised by other practitioners.

Another essential part of the healing process is about taking practical steps. A person in spiritual emergency should temporarily discontinue all forms of spiritual practice. The process of primalling is a spiritual practice in itself; a surrendering to the now. Continuous deep meditation may bring more and more pain to the surface, causing even further problems. Also helpful, is a change in diet to include more "grounding foods" (such as red meat or complex carbohydrates for non meat eaters), becoming involved in simple activities, such as gardening and taking light exercise (walking), and gentle yoga. Creative expressive arts also
allow the expression of emotions through the various mediums. Sam Turton, on his website www.primalworks.com gives a very comprehensive list of ‘homework that heals’.

Lack of awareness of the process can keep the person trapped in their defences for a long time whereas giving the person in crisis a positive context for their experiences and sufficient information about the process that they are going through will create a safe and secure passage to enlightenment. It is essential that they move away from the concept of disease and recognise the true nature of their crisis.

Within the Kundalini tradition, interestingly enough, a recommended yoga exercise used to release major blocks in the body armor with which one can release themselves from the crippling effects of trauma is illustrated below. From a primal perspective, this looks uncannily like a ‘pre-birth pose!!

![Fig. 10 Primal Release Pose](image)

It is described as “… ideal for contemplating ones "Fundamental Doubt" over whether the Universe is indeed supportive of you”.

(Biology of Kundalini 2008)

“A very philosophical contemplation on a first line pain”!
We as Primal integration facilitators also need to widen our theoretic perspective to cover the whole spectrum of human experience including non-ordinary states of consciousness. In addition, we should be willing to consult, work closely with or even refer to spiritual teachers who may have considerably more expertise in the specific types of crises associated with a given spiritual practice or tradition.

And how can we help to prevent overload happening in the first place. In the course of our journeying with our clients, we need to pay close attention to the quality of their life, and instead of initially focusing on their pain, we should facilitate the client to seek a better life so that they can unfold in an organic way. The pain will come in its own time, and thus the risk of overload is practically eliminated. A regular spiritual practice and a contemplative approach to our work will bring us closer to the client’s spiritual process, and give us an awareness of the interconnection between the psychological and the spiritual.

Post Primal (Spiritual Emergency)

People often ask if there is such a place as post primal, and how can we recognise a person who has come through this spiritual/primal upheaval? Does he/she actually exist? Is she/he enlightened? I believe the answer is not in enlightenment, but in ‘enrealment’; our ‘Realness’.

The post primal/post emergency or real person lives, with feeling, and is connected to the present. They possess a healthy ego, with which they can choose freedom, and live on their own energy, and not that of others. They can stand on their own two feet, and are aware of being in process. They usually have respect for their own and others’ limits. They can display empathy. They possess patience within which they can allow others to grow. They live in reality, without any need for masks. They are creative and live primarily from the heart. They can also be essentially lonely without isolating themselves, and they can stay with deep primal pain when it arises. They live in clarity, can sympathise with their own inner child and the child in others. They usually have an expressive body, and have a lively
sense of fun. They can be quiet and treasure solitude for the sake of solitude, but also be connected to others. They no longer need to wear labels, can fit in anywhere, are capable, and have an ability to question themselves. Their old needs no longer drive them to look for their needs to be met from others. They can cry in the present to keep access to the past. They can stand psychologically and spiritually naked in the world, no longer hidden. They are transparent, and they possess a ‘presence’ which they radiate to the world.

I began this essay by using a metaphor for primal overload as ‘volcanic molten lava erupting and spilling out,’ leaving total destruction in its wake. But, when we as humans are forced by life’s circumstances to discharge the repressed molten energy of a lifetime and be fortunate enough to be accompanied by an ‘enlightened witness’ who is supportive of this powerful process, this burning lava no longer solidifies as molten rock, but instead becomes erupting steams of living energy, bringing healing in its wake.
In walking the spiritual path the human spirit rediscovers its own deep nature: made to find a home, a bright home in the cosmos. If we do not find our way, how dire will the consequences be?

Jack Finnegan (The Audacity of Spirit)

I believe that our human spirit is revealed in our creative drive; in our struggle to create harmony in all the areas of our life. It is this spirit that invites us to remain open to the divine, to dance in uncontainable self-transcendence, to explore our potentiality, and to engage in transformative action. Our human spirit is relational, and needs to be awakened from its fears and sense of hopelessness whether through crisis or tragedy, or even moments of deep joy. Kundalini awakening, (spiritual emergency) triggering primal overload is not a supernatural experience as many people believe, but simply a natural experience that’s super! And we as primal integration facilitators and spiritual directors are the privileged ones who are invited to join in the transformational dance of our clients and directees as they respond to the deep music of their soul that whispers of God’s promise. In walking the spiritual path, the human spirit rediscovers its own deep nature; its essence. By grace it responds to the homecoming invitation, and we as their facilitators are the blessed bystanders.

Clare Gill is a Spiritual Director and a Primal Integration Facilitator, living and working in Ireland. She can be contacted at seagull@irishbroadband.net.

Bibliography

Books


Janov A. 1983 *Imprints-The lifelong effects of the birth experience* Coward McCann


**Internet articles**

Collie Ed. 1995 *Shared Transformation*. Retrieved 15/05/08.  
(http://www.elcollie.com/st/st.html)

Turton Sam, 2002 *Homework that heals* Retrieved 26/05/08.  

**Articles.**

Kornfield Jack (1993), *a psychologist and experienced meditation teacher, described what he termed a spiritual emergency that took place at an intensive meditation retreat he was leading.*


**Illustrations.**
http://www.touchdrawing.com/ Resources for Creative Awakening – © Debora Koff-Chapin


Maslow Hierarchy of Needs Pyramid. - 2008

http://www.angelo.edu/faculty/rprestia/1301/images/IN495%20munch%20BST%20%20Scream%201893.jpg – Munch (The Scream) 2008

Clare A. Gill 2008 (Digitally created *Diagrams of Consciousness*)