

Kabbalah and Psychotherapy

A Dialog With

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Parts I and II

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How has Kabbalah influenced your practice as a psychotherapist?

There have been many influences on my practice as a psychotherapist, including Freud and Jung, Wilhelm Reich, Maslow, Lacan, Winnicott, Bion, Rogers, Yalom, as well as my reading of the philosophers Hegel, Buber, Wittgenstein and Derrida, to name just a few. It was only after I had been practicing psychotherapy for several years that I found the symbols of the Lurianic Kabbalah to provide a unique structure around which to understand the psychotherapeutic process. I should point out that I have never understood psychotherapy to be a medical treatment or ‘technical’ procedure, but have always considered it a dialogical practice, the aim of which is to expand the horizon’s of the psyche and open the individual to his or her own self-creative and self-transcendent possibilities. When psychotherapy is successful, it is the client’s or “patient’s” own creativity that leads him or her to become more fully actualized as a human being and to move out of, or go beyond, his/her depression, anxiety and other psychological symptoms. As the Lurianic system is a symbolic account of creation, and of *creativity* in general, it is only natural that it should be applied to the process of psychotherapy, which seeks to awaken and harness the individual’s creative powers.

How can a particular religious or mystical perspective, Kabbalah, be brought to bear on the psychotherapeutic process, without constricting the therapeutic dialog?

I do not agree that Kabbalah, at least as I understand it, is a “particular religious perspective.” The Kabbalistic symbol of *Ein-sof*, literally “without end,” which *some* equate with an infinite “God”, appears within the psychotherapeutic process simply as the potential for infinite dialog, interpretation and understanding. While in ordinary life the infinite potential of speech and dialog is radically constrained by considerations of topicality, propriety, social and cultural convention, etc. the psychotherapeutic process is one in which the *potential to say anything* is maintained much longer and, when the process is working well, remains always in view. *Ein-sof* then becomes the “infinite container” within which the psychotherapeutic dialog has room to grow creatively and well beyond the routinized pathways of ordinary speech and discourse. The therapist is a part of this dialog, but generally remains non-directive; listening, tracking, clarifying, and at times, complementing and expanding upon the client’s productions, always in a manner aimed towards enhancing the dialog and the client’s experience of him or herself, and his/her relations to others and the world. The therapist, in his or her speech or silence, should always seek to expand the possibilities of dialog, thought, feeling and experience, rather than constrict, sum-up, or close them off. In psychotherapy there is never a “last word.”

Does this mean that psychotherapy never comes to an end?

So understood, psychotherapy does not come to an end, any more than thinking comes to an end. Particular psychotherapeutic relationships do and should conclude, but the psychotherapeutic process, which is one of dialog to enhance the creative possibilities of the self and its relations to others, is infinite. At various points in an individual's life, usually at points of crisis (and therefore at points of opportunity for creative change) an individual can enter into a formal therapeutic relationship. Such relationships come to an end, just as other relationships, and creative ventures and dialogs come to an end. At times therapy ends because the individual has reached a point of closure in a particular creative or dialogical process; at other times therapy ends because of inhibitions resulting from a failure to maintain the potential for infinite dialog—in which case therapy becomes one more routinized discourse. This does not mean that the individual has reached a permanent end in the therapeutic/creative process. I do not believe that there is a “final analysis” any more than I believe that there is a final or ultimate philosophy. The creative process, as expressed in the symbol of *Ein-sof*, is infinite. That being said, the course of any individual psychotherapeutic relationship can vary from a single session to many years.

How, then, does a client know if and when to terminate a psychotherapeutic relationship?

This is a complex matter but one that should be determined completely from the client's end. Clients should enter therapy knowing that they can terminate *at any time*, without expecting to have go through a drawn out process in which the therapist “analyzes” their motives for leaving. Such an analysis of the client's motives for termination is possible and even beneficial but should be done only at the client's, not at the therapist's, initiative. This is important because client's should not be deterred from entering treatment by a fear that they will not be able to “get out,” and they should never remain in therapy simply because they fear their therapist's disapproval or resistance to their terminating. Unlike other human relationships, formal psychotherapy is at the will of the client only. When clients announce that they are leaving therapy they should be *asked* if they wish to explore their reasons for doing so. Therapy and analysis ends the moment the client no longer wishes to engage (or does not feel capable of engaging) in the therapeutic process. It can always resume at a later time. To my mind there are very few exceptions to this rule (imminently suicidal clients are one). As I have said, the therapeutic process, like thought itself, never comes to an end, but this does not mean a particular therapeutic relationship should go on forever. It may last a single session or go on for years, and each, in its own way, can be beneficial.

Must one believe in God, or as you put it *Ein-sof*, in order to benefit from the kind of psychotherapy you provide?

Absolutely not, though in the case of *Ein-sof* it is a bit unclear what believing in or not believing in it entails. Indeed, the Kabbalists mindful that *Ein-sof* is inclusive of all things, ideas, attitudes, emotions and beliefs, held that *Ein-sof* includes “unbelief” within itself and moreover that *Ein-sof* is the place where faith and unbelief meet. I have worked with those who presumably “believe in God” and those who presumably don’t; the Kabbalah as I understand places a far greater emphasis on asking and being open to the great questions than on anyone’s particular answers to them. As the Kabbalist Shimon Labis wrote in his book, *Ketem Paz*, “Concerning everything that cannot be grasped its question is its answer.”¹

Do you ever use specific therapeutic techniques or recommend to your clients that they consult with a psychiatrist in order to obtain medication for their psychological symptoms?

There are certainly a number of, e.g. meditative, relaxation, and cognitive techniques that can be of enormous benefit in helping to relieve the client’s suffering and which can also enhance the psychotherapeutic process. There is, for example, no doubt that the negative ideas that clients habitually repeat to themselves foster and sustain depressive feelings. To take another example, I have found that with certain clients the *physical posture* they assume in the therapist’s office can have implications for the manner in which they experience and process emotions during therapy. In addition, there are times that I, like nearly all therapists, must depart from an open psychotherapeutic dialog and provide my clients with specific support, direction, techniques for anxiety reduction, etc. At times I will also suggest a referral to a psychiatrist for a medication consultation. While such techniques and departures are often necessary and very helpful, I always try to introduce them in a manner that results in the least degree of interference with the psychotherapeutic dialog.

Let me expand somewhat on this theme, as it goes to the heart of my conception of myself as a psychologist and psychotherapist.

There are two fundamental attitudes that a psychologist can take towards his or her clients. In one attitude the psychologist treats his client as an autonomous, rational human subject, and seeks to foster conditions, particularly in the therapeutic relationship, in which the subject’s autonomy, reason and creativity are respected and enhanced. In the second attitude the psychologist treats his client as a living organism whose adaptation to the environment and sense of well being are to be maximized. The value or goal implicit in the first attitude is autonomy, creativity, self-actualization and respectful relatedness, while that of the second attitude is adaptation, symptom reduction, happiness and behavioral change. The first attitude leads to listening, curiosity by an ‘unknowing’ therapist; while the second attitude leads to the use of techniques for symptom reduction and cognitive-behavioral change by a psychological expert. Using Martin Buber’s terminology we might call the first attitude one of “I and Thou” and the second that of “I and it.” As a psychologist I have functioned and must function within each of these

¹ Daniel Matt, “Ayin: The Concept of Nothingness in Jewish Mysticism,” in Lawrence Fine, ed., *Essential Papers on Kabbalah* (New York: New York University Press, 1995), p. 96 n.37

attitudes, often finding myself on the margins between them. As a *psychotherapist* I attempt to maintain myself within the first (I-thou) attitude as much as possible, though I recognize that without the second (scientific, technical, 'I-it') attitude the first would, in many cases, be impossible. There are, for example times, when the administration of psychotropic medications or the use of techniques that foster immediate symptom-reduction and cognitive-behavioral change are a necessary adjuncts or even pre-conditions for treating the client as an autonomous subject. Further, such "techniques" as meditation, cognitive therapy, and deep-muscle relaxation actually enhance an individual's freedom rather than detract from it. I have found it useful in my work to formulate the following guideline: When treating one's client from a technical or medical point of view, always do so with the maximum respect for his/her reason and autonomy that is practical under the circumstances, and always with the goal in mind of restoring the patient to full reason and autonomy.

Does this mean that you regard self-autonomy or self-actualization as the ultimate goal of therapy?

Not really. Ideally, the psychotherapeutic situation enhances the subject's autonomy, awareness, flexibility and self-creativity to a point that exceeds the degree to which this can be achieved under ordinary circumstances. However, at this point a paradoxical effect can occur; the client, having shed the constricting self-conceptions and identifications that led him into therapy begin with, now takes on a new identification: with the infinite dialog and respect for the 'other' which is the hallmark of the therapeutic process itself. In doing so he or she actually transcends his particular ego and identifies with something beyond him or herself: the autonomy, right to be, and "actualization" of each person, event, or thing he/she encounters in the world. So one might say that the goal of psychotherapy is the psychotherapeutic attitude itself. I say this of course, knowing that some will regard this as utterly self-serving, when it is actually meant to be the opposite; for the psychotherapeutic attitude is precisely that which listens to, attempts to understand, respects the autonomy, and promotes the actualization of, the *other!* So the goal of psychotherapy is neither adjustment to the environment, or self-actualization, but nothing other than the furtherance of the therapeutic attitude itself.

How is this connected with the Kabbalah?

In Kabbalistic terms the therapeutic attitude, is the attitude necessary to bring about *Tikkun ha-Olam*, the restoration and emendation of the world. In the Lurianic myth, after creation there was a displacement and shattering of the archetypal values that originally comprised the worlds. As such, sparks of divine light were entrapped by the shards or "husks" of the "vessels" which were originally meant to contain and structure the value archetypes. Each individual, and indeed each person, thing, and event that one encounters in one's life journey contains imprisoned sparks of divine light that can be liberated in one's encounter with them. Indeed, the Hasidim hold that one's life path is set forth precisely in order for one to encounter those persons, things and events that one is uniquely suited to liberate and restore. Traditionally, performance of the *mitzvot* (Torah commandments, ethical behavior) were understood to be the vehicles of such liberation. I

would add that the liberation of the divine sparks or energy within one's own soul and within that of the people and objects one encounters involves treating both oneself and others in a manner that *fosters their creative self-realization*, thereby allowing their sparks to emerge and develop. This is precisely what I have been describing as the *therapeutic attitude*. It is an attitude that one can take towards oneself, towards others, and towards one's environment. When one learns to take it towards oneself, and liberates the spark within one's own soul, one is also learning to take the therapeutic attitude towards others and liberate their sparks as well.

Are you saying that participation in psychotherapy always leads one into becoming a psychotherapist oneself?

In a sense I am, although I believe there is much more (on the technical side) to learning the profession of psychotherapy than attaining a therapeutic attitude, such an attitude is the most important ingredient. When one is in therapy, and it does what it's supposed to do, one cannot help but learn and incorporate this attitude within oneself. It is for this reason that so many individuals who have a successful psychotherapeutic experience become such good therapists themselves. Such individuals identify with their therapists, but more importantly they identify with the open dialog of the psychotherapeutic process. Even those who do not formally enter the field of psychotherapy can learn to extend the therapeutic attitude to their relationships in whatever their field of endeavor.

Is there then a psychotherapeutic ethic?

Broadly speaking, yes. The ethic of psychotherapy is quite simply that of free dialog, multiple perspectives and manifold interpretations; in short, to foster an open economy of thought, feeling and imagination. Indeed, if psychotherapy did not exist, something like it most certainly could be derived on ethical grounds alone. We might say that the core of this ethic involves an openness to and dialog with the other, an honest examination of the self, a disavowal of dogmatism, and a faith in the self-creative powers of the human psyche.

How does this ethic comport with the ideas of the Kabbalah?

I believe that there are certain Kabbalistic principles and ideas that lead almost inevitably to the practice of psychotherapy as I am describing it. Amongst these are the ideas of (1) the importance of self-contraction as a condition for creativity in self and others, (2) the supremacy of questions over answers, (3) the infinite number of meanings present in every text and event, (4) the multiplicity of perspectives is necessary for a complete description of the world, (5) the interdependence of presumably opposing ideas (*coincidentia oppositorum*), and (6) the need for a compassionate reconciliation of judgment with kindness. While the Kabbalists themselves did not quite develop the form of psychotherapy that follows from their own principles, later Jewish mystics, the Hasidim, came quite close to doing so.

Does psychotherapy promote individual human happiness?

Yes, absolutely. We must remember that in Judaism, *sameach*, “joy” or “happiness” is actually a divine commandment! The Torah (Deuteronomy 26:11) commands “You shall rejoice with all the good that the Almighty has given you.” While the Kabbalist of Safed engaged in many ascetic practices they were clear that a life of joy was a prerequisite for both mystical experience and world-redemption. Chayyim Vital held that nothing impedes mystical inspiration ...as much as the quality of sadness.” The founder of the Hasidic movement, Israel Baal Shem Tov, the “Besht” held that “One should always be in a state of joy,” and indeed the entire Chasidic movement can be characterized by its unremitting effort to re-inject joy into a religious life that had become routine, obsessive and over-intellectualized. The Hasidic master Nachman of Bratslav went so far as to hold that the raising of the sparks and the overcoming of evil and darkness in both the lower and upper worlds results primarily from humankind’s joyful state of mind.

Just as God is said to “rejoice in His works” (Psalms 104:31) humanity, by participating in the creation and perfection of the world (*Tikkun ha-Olam*) experiences a joy that mirrors that of divinity. Psychotherapy, as I understand it, is primarily directed to promoting the individual’s expression of his/her unique creativity, and joy and happiness is an inevitable byproduct of such creativity and self-actualization. Nevertheless, one must also consciously work on cultivating personal happiness, and the Jewish tradition has a great deal to say about how this can be achieved. Our sages’ prescription for happiness actually traverses several of our contemporary schools or paradigms in psychology, including the cognitive, behavioral and the humanistic-existential.

At the risk of gross over-simplification I will try to very briefly hint at some of what the Jewish, particularly the Jewish mystical, tradition offers as a “prescription” for human happiness.

(1) On a purely behavioral level the tradition enjoins us to endeavor to always maintain a pleasant countenance and deportment in each of our interactions with others. (2) From a more “cognitive” point of view, we are told not to allow our happiness to become dependent upon any factor over which we have limited or no control (e.g. wealth, possessions)—this is implied in the Kabbalist Elijah de Vidas’ axiom that a person should derive more pleasure from serving God and performing *mitzvot* than from obtaining all the money on earth. Indeed a person should (3) seek out and attempt to enhance the possibilities of creativity, joy and *tikkun* in each situation, event and person he/she encounters on life’s path. (4) A corollary to this is the Jewish maxim that a person’s pleasure should derive from what one can creatively give to others and do to improve the world rather than from what one can obtain for oneself. (5) A person should strive to always take pleasure in the gift of life itself and the myriad details of the world’s existence. (6) The Kabbalists held that great joy can be derived from developing those character traits that are implied by each of the *Sefirot*, e.g. knowledge, wisdom, kindness, compassion, etc. and in particular by cultivating humility, avoiding honor, and limiting anger, hatred and resentment. Finally, one should (7) practice *Tzimtzum*, (and refrain from *loshon hora*—malicious gossip) by limiting, measuring and controlling one’s

malicious speech, as so much that is said thoughtlessly leads to unhappiness both for others and oneself.

However, an individual should never attempt to force these conditions upon him or herself, particularly in the absence of efforts to understand his/her own desires and enhance his psychological openness and creativity; rather these traits and behaviors should grow organically in the context of what I have been describing as the psychotherapeutic attitude: the open economy of thought and feeling that leads to both self-actualization and self-transcendence. As I said just a few moments ago, the infinite dialog and respect for the 'other' in which psychotherapy consists leads beyond the "personal ego" and also beyond the acquisitive conception of happiness that dictates most people's lives. It is in this context that the "prescription" for happiness that I have just described can take permanent root and effect.

The therapy that you describe as *Kabbalistic* differs radically from the "healing of souls" conducted by the Kabbalists themselves, specifically the techniques of Rabbi Isaac Luria, which involved, amongst other things reading letters on his disciples foreheads and prescribing acts of penance for purported sins that appeared to him via this procedure. How do you explain this difference?

As I have explained in various writings, the Lurianic symbols of *Shevirat ha-Kelim*, the "breaking of the vessels" and *Tikkun* (emendation, restoration) suggests that all vessels, all containers, all world-views and ideas, including the Lurianic Kabbalah itself, are continually subject to deconstruction and emendation. The Kabbalah originally developed a form of therapy for the soul that was conditioned by a complete immersion in myth (the 'imaginary' order) that can no longer serve us in the modern and post-modern age. The old Kabbalah has, on my view, itself undergone a "breaking of the vessels," resulting from its incapacity to contain the light of reason, relativism, multiculturalism, individual psychology and other modern deconstructive forces. As such, those interested in the relevance of the Kabbalah to contemporary life, have been forced to reconstruct it in a manner that accommodates the modern world-view and which, while continuing to respect the mythical, symbolic and imaginary order, is no longer fully immersed within it. The emergent "New Kabbalah" draws upon symbols and ideas that were clearly present in the original Kabbalah, but utilizes them to foster a dialectic between myth and reason. While many of Luria's methods of healing can no longer serve us (unless we are willing to sink back into a complete immersion in the imaginary order) the Lurianic theosophy, when understood in the context of contemporary psychology and philosophy, provides us with new methods that are far more appropriate for healing the modern soul. These methods, which involve an open dialogical encounter between "patient" and "therapist", were generally recognized and practiced by the heirs to the Lurianic tradition, the Hasidim, who in the 18th and 19th century had already modified or abandoned Luria's techniques in favor of the more psychotherapeutic approach of the *rebbe-hasid* encounter.

Can you provide an example of the Kabbalistic method that you apply in psychotherapy?

One important example of this is derived from the Lurianic principle of *Tzimtzum* (contraction and concealment), which holds that in order for the world to be created the divine author had to first perform an act of contraction, concealment and self-limitation. While the therapist's job is to be fully present for the client, this can, paradoxically, only be accomplished if the therapist contracts his ego, and in effect, gets out of the client's way. If the therapist fails to perform this act of self-limitation he/she becomes just one more force limiting the client's thinking, behavior, and creative expression. The therapist must continually ask him/herself what, if anything, can be said here that will encourage the client to continue the associative, dialogical, self-creative process, and if not he/she says nothing. We must remember that much that is said in ordinary conversation serves to cut off the creative process rather than further it. While the therapist's interventions will typically take the form of questions, we must remember that even questions can at times limit the client's associative process. Even outside of formal therapy, silent but intent listening is often the best that we can offer an other in need. While patients typically prefer their therapists to be active and directive, and in some instances as I have pointed out, active intervention is warranted, the ultimate goal of psychotherapy is to enhance the client's capacity for self-creation, and this can ultimately only be accomplished by *getting out of the patient's way*. The Hasidim, in their wisdom, recognized, that while one must give active guidance to a child, there comes a point in a child's life where one must perform an act of *tzimtzum*, and allow the child to develop on its own.

Does this mean that you favor the ideal of the silent, opaque analyst?

I have no interest in the therapist's silence or opacity for its own sake, and indeed there are times when I do engage in an active dialog with and make concrete suggestions to my clients. In addition, there are times when I am also self-disclosing. My only criteria is whether such active dialog, concrete suggestions and self-disclosure ultimately furthers the therapeutic process and the client's self-creation. The important point here is that the attitude of the therapist must be one of complete openness, intent listening and unconstrained, "free-floating" observation. Such an attitude is very similar to what Buber described in his book, *I and Thou*. It involves a form of relating to the other which permits and encourages the other to develop his thoughts, feelings, experience and words according to his or her own *nisus* or direction without demand, expectation or constraint. The therapist refrains from diagnosing, formulizing and categorizing the client. In fact he/she practices a suspension of "knowledge" and an intentional "unknowing", so that the client can emerge in his/her own uniqueness, outside the bounds of any prior categories. Wilfred Bion puts it nicely when he says that the psychotherapist is without desire, expectation, memory or (analytic) understanding, precisely in order that he/she remain fully open to the presence of his/her client. The therapist's main job is not to diagnose, make incisive interpretations, or to "figure the client out," but rather to provide an environment within which the client can be and become him/herself. Sometimes the therapist's words are necessary to maintain this environment. Sometimes the therapist's

questions, clarifications, interpretations and disclosures clearly enhance the client's self-creative process. In such instances they certainly should be spoken.

Do you believe in the "unconscious"?

Yes, but let me try to clarify what I mean with this term. First, I believe that it is largely within the context of the therapeutic relationship that the unconscious can emerge. This is because the unconscious consists of feelings, thoughts, desires, projects and creative acts that have not (yet) emerged in an individual, because of inhibitions, repressions, constricting identifications and failures of self-assertion and self-actualization. The unconscious does not primarily consist of that which was once conscious and which has subsequently been forgotten and repressed, but rather that which has, for the reasons just described, yet to be fully realized, formed, actualized or even created. In Kabbalistic terms, just as a very substantial (and the perhaps the most important) portion of the world was left uncreated by God, a portion of the self remains uncreated in each individual. It is this yet-to-be-actualized self that is the major focus of the rebbe-hasid relationship and which, to my mind, should be the major focus in psychotherapy. While at times psychotherapy will focus upon repressed memories, affects, and ideas, or the de-automatization of malevolent childhood identifications, this is always done with the aim of providing the client with an inter- and intra-psycho space within which he/she can produce creative solutions to his/her own life problems and further his/her own creative potential. The most important sense of the unconscious is not that part of one's past that has been stored away in an archive, but rather that part of one's potential which has never been realized or, perhaps, even recognized. To take an example from my own life; for years I admired the capacity of others to draw what they see, to provide a subjectively colored rendering with pencil, paints, charcoals or pens of their world. I had never dreamed that I had the ability or capacity to do this myself, and indeed every time I had put a pencil to paper with the intent of drawing instead of writing my attempts failed miserably in my own eyes. At age 50, however, the desire to express myself through images rather than language welled up to the point that I felt I must take this task up in a serious way, and, in a matter of weeks, after much practice and reading several practical books on drawing and painting I was producing drawings that amazed me, not only for their (relative) quality, but for their capacity to provide me with a sense of creative fulfillment that I had hitherto been unable to acquire by any other means. To my way of thinking, the artist within me had been repressed and unconscious since childhood, a yet-to-be-created aspect of myself that had been inhibited and repressed by my self-image as a non-artist. Kabbalistically, when I began drawing and painting, a spark was liberated within my own soul.

You mention the rebbe-hasid relationship. How does that impact upon your conception of psychotherapy?

One role that the Hasidic rebbe assumes is that of attentive listener and adviser to his hasidim or followers. Such listening is said to enable the rebbe to advise the hasid on a particular vocation course of action that will bring the hasid in contact with those divine sparks which it is his unique destiny to raise and redeem. The assumption here is that the

rebbe is able to grasp the hasid's creative possibilities before the hasid comprehends them himself. While the psychotherapist will generally refrain from providing his or her client with such specific advice and direction, it is sometimes the case that in the process of active listening a distinct sense of the client's feelings, attitudes, identifications, desires, and creative potential becomes manifest to the therapist before these are recognized and comprehended by the client him/herself. At such times a therapist who is quite sure that his impressions are not a function of his own projections may reflect these feelings, attitudes, desires and potentials back to the client by means of a query, question, or simple "punctuation" of the client's speech. In this way the therapist's insight can be conveyed to the client in a manner that mobilizes the client's unconscious creativity and process of self-actualization. This kind of relationship is not limited to the client-therapist dyad. In fact, those who genuinely love us do not do so by projecting their own needs and desires onto us, but rather by seeing and fostering our creative unconscious before we even recognize it in ourselves. Such individuals often silently but steadily convey a faith in our creative potential that can help ignite a similar faith in our own souls. This, I would say, is the impact of the rebbe-hasid relationship on my conception of psychotherapy: a listening for and experiencing of the client's as yet unconscious and unrealized potential for creativity, maturity, wisdom, self-actualization, growth, beneficence, etc. In short, the therapist must come to know and understand not only what the client is and how he got there, but more, importantly, must come to realistically envision what the client can be if he/she were to fully realize his/her human potential. This is what I call therapeutic vision.

Aren't there dangers that even with the best of care and intention that such "therapeutic vision" will stem from a projection on the part of the therapist?

Yes. This is why it is always important for therapists to make interpretations by means of a query rather than by way of an assertion. While the therapist punctuates the client's speech it is never with a final period that brings all discussion to an end. This having been said, I must say that a certain projection is present in all relationships; without it we would be unable to sympathize and empathize with others. The important point to remember is that such projection/empathy is presented in a manner that respects the client's autonomy, and which is designed to potentiate the client's desire and creativity. The problem that virtually all clients bring to therapy is that their psyche's are constricted by projections and identifications that have been forced upon them by parents and others who saw the child as an extension of their own egos and therefore failed to respect the child's own desires and creative autonomy. Much work in therapy is spent in disentangling these inhibiting identifications. Therapists do their clients the greatest disservice when they too attempt to mold their clients in their own image. Still, I think we can all distinguish between a question, for example, that is woven out of the desire of the questioner and one that is asked as a means of reflecting and enhancing the desire of the one who is queried.

Earlier, you described how the Kabbalistic symbol of *Shevirat ha-Kelim*, the "breaking of the vessels" implies that all "containers," for example ideas and world-views, shatter and are continually subject to deconstruction and emendation. Is the symbol of the Breaking of the Vessels reflected in the therapeutic process?

It most certainly is. With the emergence of unconscious material leading to a renewed sense of self-creativity it is inevitable that the psychic structures, e.g. attitudes, beliefs, moods and relationships, which in the past held the client in a certain psychological place will be challenged, stretched, displaced and, in many cases, ruptured. Often such a displacement or rupture will have already taken place, or at least begun, just prior to the client's entry into "treatment." This process corresponds to the moment of creation referred to as the Breaking of the Vessels in the Lurianic Kabbalah. The client will experience this rupture as a crisis, and indeed it is one, but it is also a moment of creative opportunity. It is for this reason that the Kabbalists held that *shevirah* (rupture) is a necessary precondition for *tikkun*, the restoration, emendation and repair that completes both world and self.

The very process of open dialog that is inherent to psychotherapy will in the majority of cases lead to a crisis in one or more of the client's identifications, self-conceptions or life roles. This provides a unique opportunity for the client to initiate a change that accords better with his higher or more actualized self. However, during such crises, the therapist may feel pressed, both by his client's and his own anxiety, to offer a solution, advice or definite direction that will bring an end to the crisis and result in symptomatic relief. The therapist may, for example, be inclined to counsel the client to end (or return to) a difficult relationship, leave (or adapt to) a limiting job or career, etc. While such advice is well-intended and often "correct" it can result in a premature restoration of the rupture brought on by the client's crisis. Except in certain potentially destructive circumstances (suicide, paralyzing depression and impending psychosis) there is great value to the client and therapist to ride out the storm to see what solutions spontaneously emerge from the client's side. Such creative solutions are far more likely to be meaningful in the long-run than those adopted as an expedient to ameliorate one's mental pain.

With regard to *Tikkun*, is the purpose of psychotherapy simply to repair and emend the client's soul, or does psychotherapy lead to *Tikkun ha-Olam*, the restoration of the world as well?

The psychotherapeutic process not only promotes the emendation (*Tikkun*) of the client's soul through the realization of his/her personal potential, but also, as I have mentioned, to an emendation of the client's relationships to others and the environment. Having had one's "difference" respected, one's desires permitted and one's feelings affirmed in psychotherapy, one becomes more inclined to take such an attitude towards others in one's life path. It is this attitude, exemplified by, but not exclusive to, the psychotherapeutic relationship, which—when it is applied to the people, objects and events one encounters in one's world—raises the sparks and furthers the restoration of the world. We should not become too grandiose about the power of psychotherapy, though perhaps we are entitled to a certain hope with regard to the world-restoring power of what I have referred to as its underlying ethic.

You mentioned the Kabbalistic notion of the coincidence of the opposites. How does this relate to the psychotherapeutic process?

The Kabbalists held that *Ein-sof* is the union of all contradictions, and in creating a therapeutic environment the therapist endeavors to provide a “sea” that is large enough to contain all the apparent contradictions in his/her client’s psyche: the clients love and hate for the major figures in his life, his affirmation of life and wish for death, his faith and doubt in himself, his affirmation of, and resistance to, the therapeutic process; to name but a few of the common ambivalences that client’s typically bring to the therapeutic encounter. Carl Jung, with his notion of “compensation,” suggested that every particular attitude, feeling or idea that emerges in therapy is likely to represent not only itself but to also serve as a “screen” for its opposite, that these opposites are dependent upon one another, and that together they form a complete picture of the client’s experience. According to Jung, it is the process of making a space for coincidence of opposites that gives rise to an individuated or actualized “self.”

We should remember that the coincidence of opposites not only applies to the client’s psychic productions but to the therapist’s as well, and to the various apparently opposing perspectives that the therapist can bring to bear on the client’s verbalizations and behavior. The coincidence of opposites is really a corollary to the basic therapeutic attitude of infinite dialog, because it helps assure that all aspects of the individual’s psyche, including those that seem to contradict one another, will be considered and heard.

You mention Jung, and you have written a great deal about the connection between Jung and the Kabbalah. Do you consider yourself a Jungian?

No. Like Jung I am interested in recovering the psychological basis and wisdom of such seemingly non-psychological disciplines as alchemy and Kabbalah, and I have attempted to show how Jung himself was influenced (largely through alchemy) by the Kabbalah. However, my practice is influenced equally by Freud, Lacan, Sartre, Derrida and others. A very important work that helped consolidate the existential aspects of my thinking was Irwin Yalom’s *Existential Psychotherapy*, which I first read over 20 years ago and which continues to help shape my work in a very practical way. I have also been influenced by the writings of my friend Michael Eigen, who is a practicing psychoanalyst here in New York.

Do you accept Jung’s notion of the archetypes of the collective unconscious?

Not in a very literal way. Some Jungians seem to believe that the archetypes, as Jung described them and as they appear in world mythology, are somehow hard-wired into our psyches and that as such they are spontaneously manifest in our dreams and other imaginative productions. These therapists place considerable emphasis on discovering and interpreting these archetypes and then analyzing their client’s conflicts in terms of these archetypal ideas, and in some cases calling forth archetypal figures within their client’s personalities and engaging them in dialog. Some of these therapists believe that the act of intuiting the archetypes is not only psychologically but spiritually significant.

While I do not doubt that a therapeutic effect can be achieved in this manner, this is not how I work. For me, the archetypes (e.g. Jung's archetypes of Mother, Father, trickster, Wise Old Man, Shadow, or Freud's *Oedipus Complex*) result from the routes that our minds naturally take because of our existential situation in the world. Indeed, as Jung himself once pointed out, there is an archetype for every emotionally salient image or idea. I am therefore careful not to limit my listening and understanding to those archetypes that are delineated by Jung or those which are expressed in a manner that seems to accord with the symbolism of the Kabbalah or other religious/mythological traditions.

On the other hand, I do believe that certain archetypes are fundamental to the *process of psychotherapy*, and that several of the most important of these are articulated by the Kabbalists in their doctrine of the ten *Sefirot*, which on their view are the *fundamental archetypes* of creation.

Are any of the *sefirot* of particular importance in psychotherapy?

They all are. In my article [The Sefirot: Kabbalistic Archetypes of Mind and Creation](#), I tried to show how each Sefirah embodies a specific psychotherapeutic principle. For example, the *Sefirah Tiferet* (Beauty) or *Rachamim* (Compassion) is a characteristic that must be cultivated by psychotherapists and serves an analogous function but is not equivalent to what Carl Rogers spoke of as "unconditional positive regard." A psychotherapist must cultivate, if he/she does not already have it, an unending compassion for the plight and suffering of the human soul. However, *rachamim*, represents a reconciliation of two other *sefirot* which represent powerful human forces: *chesed* (love) and *din* (judgment). As such, *rachamim* is not blind to judgment, but rather tempers its expression with love. It is in this sense that *rachamim* differs from Rogers' unconditional positive regard; compassion for another's situation does not always equate with approval of their behavior. Indeed, there are certain occasions where a therapist will need to (compassionately) question and endeavor to set limits on his client's behavior; when, for example, it is self-destructive or clearly violates the rights of others. One might think that in doing this the therapist runs the risk of inhibiting the client's future disclosures and thereby closing down the therapeutic process. There is, I suppose, some danger in this, but there is an even greater danger that the process will be shut down when the client realizes that the therapist is silent in response to his or her self-destructive or other malevolent behavior and, in effect, *doesn't care*. The therapist's job is to encourage unlimited discourse, but paradoxically, if the therapist places no judgments or limits on anything the client says and does, the therapeutic discourse will cease altogether as the client (like a child whose parents set no limits on his behavior) comes to feel that the therapist really isn't interested after all.

What of the *sefirah chesed* (kindness) prior to its reconciliation with judgment? Isn't there room for pure, unconditional, love?

Interestingly, the Kabbalists held that God first endeavored to create a world of pure love, but neither it nor a world comprised of pure judgment could be sustained, and they, in effect, self-destructed. There is a place, however, in psychotherapy for pure love, and this goes back to the aspect of the *rebbe-chasid* relationship we discussed earlier. Harold Searles, a well known psychoanalyst on the west coast, one who was often given to dramatic and even shocking declarations once said that he never achieved a thoroughgoing psychoanalytic cure with a patient who he had not thoroughly fallen in love with. We need not take Searles in the usual literal sense of his words to realize that he was onto something very profound. The therapist, in freely attending to his/her client, as Bion puts it, without desire, expectation, memory or (analytic) understanding (i.e. maintaining a posture of *tzimtzum*), an image will often begin to form of what or who the client can potentially be were he/she to be far more actualized than he/she currently appears to be.

This is an image specific to the particular client in which the client's emotions and desires are experienced, his/her creative potential realized, and his/her capacity for both giving and receiving love is fulfilled. It has nothing to do with the therapist attempting to mold the patient in his own image, but has everything to do with the therapist's identification with the client's desire and recognition of who the client can become on his/her own terms. Such an image often comes to the therapist long before the client can imagine it for him or herself. Sometimes I think of this image as a picture of who the client would have become had he/she not been ignored, abused, and otherwise damaged along the road to adult life. At any rate it is a very approximate image of who the client can become if he/she is assisted in overcoming the constricting self-conceptions and identifications that arise from his/her past. I believe it is important for therapists to allow an image like this to form in the course of their work. Without communicating this image directly the therapist begins to treat the client as a more fully actualized being, and in the process helps bring about this actualization. Interestingly, the therapist often feels a great sense of appreciation and even love for the individual once this image is experienced and this love (*chesed*) itself as an enormous therapeutic effect. Such an image often changes in the course of therapy as the therapist comes to know and recognize other of his client's potentials, and the fully actualized client that emerges from a successful course of psychotherapy may resemble the original image in only an approximate way. Still, such images serve a very important function in the therapeutic work as they posit an experiential, if somewhat vague of changeable, destination for the therapeutic process.

By the way, this way of looking at things gives new meaning to the biblical phrase that "God created man in his own image;" not in an image that somehow duplicates God, but rather in God's image of what man could become were he to be fully himself!

Could you say a bit more about the actualized self?

Kabbalistically, the actualized self is symbolized in the figure of *Adam Kadmon*, the primordial human, who is the first figure to emerge in the vacuum created by the contraction and concealment of *Ein-sof*. The principle here is that the actualized self emerges only when those around it withdraw and give it the space within which it can create itself. The self represented by *Adam Kadmon* represents a deepening of the personality in each of the areas embodied by the *Sefirot*: will, wisdom, understanding, love, judgment, compassion, etc. Each of these personal characteristics are actualized from within the individual rather than being imposed upon him or her from without.

How does one distinguish those characteristics that arise from within the individual, as opposed to those that have been imposed upon him/her?

The Kabbalistic image of the inner spark is helpful here. Let's take "knowledge" as an example. When knowledge is forced upon a person his/her own natural thirst for knowledge is often inhibited and his/her inner spark is encumbered and dimmed. But if his/her thirst for knowledge is awakened, say by a teacher who imparts her own enthusiasm for the subject matter, the individual's spark is disencumbered, burns brightly, and contributes to the actualization of this aspect of his self. Just as teachers can distinguish between students who have a love for learning from those who learn because they are forced to, therapists can distinguish when clients are acting out an imposition in their lives and when they are acting with creativity and joy in life. The same distinction applies to each of the *sefirotic* traits: a person can be ethical, for example, out of a fearful sense of obligation, or out of a true love and respect for ethical laws.

Having said this, we cannot say that the goal of an actualized self is ever fully achieved. The self is in constant transformation, and until the point of death is always potentially more than whatever it has been. As such, it always remains at least partly unknown.

What precisely is the role of the "unknown" in psychotherapy?

As a therapist I must to a great degree engage in the practice of unknowing. A psychotherapist, in contrast to a psychologist who is asked to conduct an evaluation, must, when he/she is engaging in the therapeutic process, refrain from diagnosing. Formulating or categorizing the client. The therapist practices a suspension of knowledge, a discipline "unknowing", in order that the client can continue to emerge in his/her own uniqueness. The danger of diagnoses and "dynamic formulations" is that they constrict the therapist's openness to the client's possibilities of creative transformation and ultimately constrict the client him or herself. Just as the Kabbalists regarded the infinite depths of *Ein-sof* to be inexhaustible and essentially unknowable we must regard the depths of our client's self to be unexhausted and unknown.

The practice of "unknowing" is one aspect of how the Kabbalistic principle of "Ayin" (Nothingness) can enter and shed-light upon the psychotherapeutic process. The

Kabbalists held that the original character of the infinite, Ein-sof, is that of nothingness, the absolute void, and that *Ein-sof* in effect has woven itself out of its own nothingness. Similarly, the human personality must be created out of its own nothingness. The Kabbalist Azriel was clear that an individual does not make spiritual progress until he or she recognizes the nought at the core of his/her own being. Psychotherapy provides a “container” within which one can recognize this nought; the finitude, mortality, and death, as well as the experiences of meaninglessness, unrootedness and unknowability that occasionally fracture the veneer of our “normal” self-understanding. It is this nought, this *Ayin*, however, which is the motivating force for both cosmic and personal change and creativity. In his book, *Existential Psychotherapy*, Irwin Yalom observed that the experience of one’s finitude and mortality often potentiates creativity as well as a connection with others and a commitment to a universal principle or cause, and that these are the very acts which enable one to transcend the “nothingness” and “meaninglessness” which the experience of mortality engenders.

Do you believe in the afterlife?

I believe that on questions such as these a therapist can take no definite position without violating the principles of therapy (and Kabbalah) itself: the principle of *infinite dialog* and *infinite interpretation*. On the other hand, the therapist cannot ignore this and other “big” questions simply because they are not amenable to a definitive or final answer. Indeed, the very principle of open dialog would assure that these questions are an appropriate subject matter for reflection in the psychotherapeutic arena. Again, according to Shimon Labis, “Concerning everything that cannot be grasped its question is its answer.”² This suggests that the very process of asking, meditating and dialoging on such questions as the “afterlife,” the “existence of God,” the “meaning of life” etc. is at least part of the *answer* to these questions. As a therapist I am open to a deep exploration and dialog upon philosophical and theological questions, but I remain committed to connecting such dialog to the individual’s own psyche, i.e. his/her personal existential situation, conflicts, relationships, etc. I do not, as do some therapists, dismiss philosophical inquiry in therapy as “resistance” and “intellectualization,” though I recognize that at times it can be those things. Ultimately, I am interested in exploring how such reflection and dialog impacts upon the client’s self-concept, creativity, relationships and other commitments. I am also deeply interested in the question of how my client’s deny, accept, and *transcend* their experience of finitude and mortality, and I believe that these *existential attitudes* are as important, if not more important than any formal views they hold about the afterlife.

Does the same really hold true for belief in God?

Yes. My understanding of the Kabbalah is that it is a theosophical system that (paradoxically) includes within itself the possibility and indeed the necessity of atheism. Psychotherapy, as I practice it, is certainly compatible with the belief in (non-dogmatic conceptions) of a higher being, but does not require it. Rather “God”, like all other matters becomes the subject of open dialog. Some may regard such open, infinite, dialog

² Matt, p. 96 n.37

itself as a *window* into the divine or “Absolute”, while others may understand such dialog in agnostic, non-theistic or even atheistic terms. For me, the important point is that God is a legitimate issue to be explored in therapy and is not to be pre-judge from either a traditional religious or “enlightened,” “scientific” point of view. This is an area where I believe the notion of “philosophical therapy,” which has come on the horizon in recent years, has made a valuable contribution. Philosophical and theological issues are legitimate concerns, both psychologically and in their own right, and should not be barred from the psychotherapy consulting room. Again, an important question for me as a therapist is how my clients relate to the spiritual and existential issues in their lives, regardless of their philosophical and religious beliefs.

Is there a Kabbalistic equivalent to the clinical concepts of pathology and neurosis?

I think that the closest approximation is the notion of the *Kellipah* (pl. *Kellipot*). A *Kellipah* is a cosmic or psychic complex, symptom, attitude, belief or emotion that constricts the individual and prevents him/her from achieving creative self-realization. On the cosmic level, the *Kellipot* are the shards of the broken *Sefirot* which serve to bind sparks of divine light, and prevent them from realizing their spiritual potential. On the psychological level, the *Kellipot* include what psychoanalysts refer to as dynamically repressed emotions and ideas, but also include any belief, relationship, attitude or behavior, whether consciously or unconsciously maintained, that inhibit and constrain the individual’s psychological growth. *Kellipot* cannot only bind individuals but can also constrict relationships between individuals, between individuals and their environment, and even the environment itself (e.g. a constricting work environment). In Jewish mysticism, the goal of human life is to untie the *Kellipot*, extract (*birur*) the kernel of divine light, and raise the once entrapped sparks (*netzotzim*) back up to the heavens.

The *Kellipot*, metaphorically speaking, bind sparks of divine infinite energy and prevent them from joining the creative energy of the individual and the world as a whole. According to Hasidic thought, the individual is enjoined not only to raise the sparks within his or her own soul, but also to raise those sparks that are entrapped within the souls of other people and in the environment as well. Indeed, the individual is enjoined to raise sparks in each of the objects and situations he/she encounters in life. Generally, psychotherapy focuses only upon those sparks within the client’s own psyche. However, as I said before, as a therapist I encourage my clients to also focus upon the *Kellipot* that bind others and the environment. It is my conviction that the psychotherapeutic attitude, when it is applied outward as well as inward, helps to raise the sparks that one encounters in others and in the objects of one’s world. Psychotherapy involves learning to truly listen to and observe both oneself and others, and to ultimately bring that same sort of open (I-thou) listening and seeing to each of one’s life encounters.

Part II of Kabbalah and Psychotherapy follows on the next page.

Kabbalah and Psychotherapy A Dialog With Sanford L. Drob. Ph.D. Part II

Do you work with your client's dreams?

Yes. I encourage clients to bring dreams into therapy. I do not, however, believe that dreams have a single significance that can be “discovered” in therapy, as though such significance was one of the artifacts buried in Pompeii. Rather, I see dreams as important stimuli to the associative, creative process, and as prompting reflection upon one's desires, emotions, attitudes and conflicts. While dreams occasionally reveal old buried meanings they are just as likely to generate new ones. Dreams are among the best examples we have of the psyche's potential for infinite creation, dialog and interpretation; for *anything* can happen in a dream, a dream can stimulate virtually *any* feeling or idea, and each individual's dreams can be understood from a manifold of personal, interpersonal, archetypal, spiritual, and existential perspectives. Dreams yield an indefinite series of layered and inter-related meanings that are limited only by the individual's associative and imaginative capacities.

The Zohar holds that some dreams are a portal to higher worlds, and I believe that it is the surprising, unpredictable, and multi-layered character of dreams that brings us close to the infinite possibilities within our own psyches, and thereby closer to *Ein-sof*. I regard dreams as an impetus to self-awareness and to creative therapeutic, spiritual and even philosophical work and I regard the possibility of multiple interpretations and the impossibility of ascertaining a single, archived “latent” meaning as a strength rather than a weakness in dream theory. Dreams can be understood as a gift of the infinite (or unconscious) even by those who regard the unconscious as that which has yet to be formed, experienced and articulated as opposed to that which one existed and has since been repressed. Dreams shatter our routine modes of thinking and feeling and are often an impetus to what the Kabbalists referred to as “the breaking of the vessels,” which is a condition for personal change and growth. At times, dreams can also be understood as (1) a means through which an individual endeavors to work out difficulties and conflicts that cannot be resolved or even articulated in wakeful life, (2) as a means of communicating an idea, thought or affect to oneself or others, (3) as a vehicle for deepening one's emotional and spiritual life, (4) as a way of balancing or compensating for a one-sided attitude in one's waking life, (5) as a means of enabling or resisting the therapeutic relationship etc. Dreams can assert, question, exclaim, express bewilderment, awe, love, hate, etc; like all other mental and linguistic productions they do not have a single grammar.

Your criticism of the “Pompei” analogy suggests that you would discard Freudian dream theory. What is your overall attitude toward Freud?

With regard to Freudian dream interpretation, my main criticism is that such interpretations often claim to unlock *the* meaning of a dream. As one perspective amongst others on a dream I have no quarrel with Freud’s model.

As for Freud in general, as I have described in several of my books and essays, I believe that the Lurianic Kabbalah anticipated psychoanalysis in a number of ways, and that the Lurianic Kabbalah can in many ways be understood as an extension of psychoanalysis to both the world and God. For example, the Freudian notion of libidinal energy that is constricted and then transformed into psychological symptoms is clearly anticipated in the Lurianic notion of divine erotic energy that is constricted and transformed into various forms of evil in the “husks” or *Kellipot*. In each system, life energy must, as it were, be brought out of exile in order to serve the aims of a liberated subject, in psychoanalysis the individual, in Kabbalah, the individual, world and God. Whereas Freud saw repressed energy only in the individual psyche, the Kabbalists see it in the collective psyche and in each object, situation and event in the world. For the Kabbalists, the task of liberating this energy extends beyond the individual mind to the cosmos as a whole and even to *Ein-sof* itself. In practical terms, this means, as I have discussed earlier, that the psychotherapeutic attitude must be extended beyond the consultation room to include all of one’s relationships.

This sounds Jungian, No?

I have a great respect for much in Jung’s work and I believe that there should be more dialog between Freudian and Jungian therapists. One of the ideas in Jung that I find intriguing from both a psychotherapeutic and a Kabbalistic point of view, is the archetype of the “shadow,” which corresponds generally to the symbol of the *sitra achra*, the “other side” in the Kabbalah. For both Jung and the Kabbalists the shadow/other side manifests as the “dark” aspect of one’s personality, those traits, emotions, attitudes and behaviors which one attempts to deny in oneself or suppress. The Zohar, however, is clear that those who attempt to ignore or suppress the “other side” will in the end be controlled by it, and further that the energy contained within it is the ultimate source of creative and even altruistic activity, if only it can be freed and redirected for these purposes. Jung, of course, made nearly the very same claims with respect to the archetype of the “shadows.” The parallels between the Kabbalah and Jung on this and other points are understandable given Jung’s own interest in the Kabbalah and his even greater interest in the spiritual dimension of alchemy which was in large measure derived from Kabbalistic sources. In psychotherapy, the problem of the “other side” arises not from the fact that client’s have libidinous, aggressive and even thanatic impulses, but rather because these impulses are suppressed and often go unrecognized. The suppression and repression of these impulses results in a constriction in and rigidity of the personality and dogmatism in thought. Further, there is typically an aggressive effort to suppress those individuals or aspects of the environment that threaten to undermine the suppression of one’s impulses. The psychoanalyst Wilhelm Reich referred to this as the “emotional

plague.” Kabbalistically, such suppression results in and strengthens the *Kellipot* which bind the individual’s soul. In psychotherapy, the client is encouraged to *articulate* all of his/her thoughts feelings and impulses. In adhering to the principles of free association, infinite dialog and infinite interpretation, psychotherapy loosens the rigidity and overcomes dogmatism that had inhibited the client’s creativity and self-actualization. The therapist makes it clear that he/she is interested in listening to the client’s darkest thoughts and dreams, not in order to judge the client, but in order to aid the client in assimilating the fullness of his or her own being.

By being non-judgmental, aren’t you giving license to the client’s unethical and even evil impulses?

This is a standard criticism of psychotherapy, and particularly psychoanalysis, from a traditional religious point of view. First, there is a vast difference between thoughts, dreams and feelings on the one hand and behavior or even contemplated behavior on the other. It is the latter, not the former, that should be the focus of our ethical concerns. Second, it is the very judgmental suppression of the “other side,” of one’s presumably negative thoughts, feelings and impulses that leads to the emotional rigidity, dogmatism, and repressive aggression that results in much of the damage that human’s do to others, themselves and the planet. My own view is that an “open economy” of thought and feeling is the fundamental basis for an ethical life, but here we are moving into axiology or value theory. The main point is that the therapist’s non-judgmental stance is not initiated in order to abrogate ethics, but in order to make a genuine ethics possible.

How is it possible to base such an “open economy” on a particular religious vision?

Several core Kabbalistic principles lead to the idea that no single perspective or point of view has the corner on truth. These principles include: (1) that scripture, and by extension all texts, are subject to an indefinite if not infinite number of valid interpretations, (2) that each thing in the world can be understood from a variety of perspectives or *behinnot* (3) that fundamental beliefs and ideas imply the truth of their opposites or contradictories, (4) that God, and also the human soul, is infinite in nature, and (5) that the “vessels” of thought, emotion, spirituality etc. through which we attempt to contain and circumscribe the light of the infinite continuously overflow, are displaced, and or shattered, requiring new vessels to take their place. Those interested in these Kabbalistic ideas are referred to my books *Symbols of the Kabbalah* and *Kabbalistic Metaphors* and the various articles that address these ideas on the New Kabbalah website.³ However, in spite of clear trends

³ S. Drob: The Coincidence of Opposites in Jewish Mysticism. www.newkaballah.com

S. Drob: "The Only God Who Can Save Us (From Ourselves):" Kabbalah, Dogmatism, and the Open Economy of Thought. www.newkaballah.com

S. Drob: The Torah of the Tree of Life: Kabbalistic Reflections on the Hermeneutics of Infinity in Scholem, Idel, Dan, Fine and Tishby www.newkaballah.com

within the Kabbalah that deconstruct any efforts to close off dialog and interpretation. The Kabbalah is often presented as yet one more closed system or discipline that promises a unique and exclusive access to spiritual enlightenment or truth, and there are indeed numerous elements within Kabbalistic writings which suggest that this is indeed the case. The “advance” of what I refer to as the “New Kabbalah” has been to emphasize those aspects of the traditional Kabbalah that affirmed infinite dialog and interpretation and the deconstruction of all so-called absolute “truths.” The New Kabbalah further applies traditional “deconstructive” Kabbalistic ideas to those aspects of traditional Kabbalah that tend towards dogmatism and closure. It is for this reason why I have referred to “deconstruction” as the “Gateway” to the New Kabbalah. However, while such deconstruction is fundamental to the New Kabbalah, it is only half the story; the Kabbalistic symbol of Tikkun (repair, restoration) assures that the Kabbalah will be *reconstructive* as well, and that there is indeed value to developing a coherent religious (or secular) philosophy and world-view. I believe that such a world-view, if read through an open, multi-valent lens is actually present in the Lurianic theology, which, on my view, is both a “system” and a “non-system” of thought.

Now the process of psychotherapy and the role of the psychotherapist is to gently, but continually apply a deconstructive form of inquiry to those aspects of the client’s discourse and behavior that suggest rigidity, dogmatism and closure, while at the same time permitting and even encouraging the client to develop a sense of identity, valuable relationships and a flexible but meaningful world and life-view. However, the therapist must be mindful that the desire to achieve a world-view as a bulwark against all anxiety, even the anxiety of loss and death, can lead one to adopt a religious vision or philosophy that leads to a rigidification of the personality and, paradoxically, closes one off from the full source of meaning in the infinite, *Ein-sof*. Therapy cannot and should not be a cure for all anxiety and uncertainty, and –on my view—those religions that pretend to be one—can be inimical to the therapeutic process.

How, then, do you regard the mystical states of unity that are supposed to lead to detachment from the worries and anxieties of this world?

Clearly, individuals from a wide variety of religious traditions do have powerful mystical experiences which they spontaneously report as suggesting or even confirming the unity of all things and/or the union of the self with God or the universe. Such experiences not only produce a sense of great peace, but also enable the individual to identify with something far greater than the self and thus reduce or eliminate many of the anxieties associated with the personal ego. Typically, these experiences further result in a great love for all persons, living and non-living things, events, moments and details of the world, as each of these are now understood to be an expression of a divine, unified whole. Such unitive experiences are, on my view, perfectly compatible with the “open economy” that I have been describing. This is because a great love for all things (what the Jewish tradition refers to as *ahavah rabbah*) leaves no room for dogmatism, close-mindedness, and prejudice. The implication of such a love is that all things, all ideas, indeed all moments in the cosmos, be allowed to develop and realize their own essences,

free of the limitations and constraints of the personal ego. This is the basis for what the Kabbalists' *Tikkun ha-Olam* (the restoration of the world). I also believe that such mystical/unitive experiences are compatible with, and ultimately the fulfillment of, the psychotherapeutic attitude as I understand it.

On the other hand, there are religions, or interpretations of religions, that advocate the notion that as long as one adheres to a specific religious "truth" and rejects ideas, perspectives and things associated with the "infidels" one will be guaranteed a place in heaven and freed from the anxieties and travail of this world. While these religious interpretations often do have an extremely powerful impact upon their adherents they tend towards both dogmatism and a rigidification of the personality that, in my view, is inimical to both the psychotherapeutic process and *Tikkun ha-Olam*.

Are you opposed to all specificity in religion; for example, being Jewish, Christian or Buddhist?

Not at all. I think that one can be either an open Jew, Christian or Buddhist or a closed and dogmatic one. However the term "specificity" is an interesting one that I would like to comment upon. Those of us who live in western cultures are used to thinking that 'truth' and 'knowledge' must be precise and specific. While there are certain advantages to this way of thinking, the costs to the psyche of thinking too specifically, and especially of thinking specifically too soon, can be very great. We assume that a specific, immediate solution to a problem is the best solution, when in matters of the psyche the best course of action may be to swim in the ambiguous depths of a problem for awhile until a deeply felt and considered solution to our problem emerges. The open economy of psychotherapy should also be a deep, wide and patient economy, one which recognizes that major life issues often require deep exploration and periods of quiescence and even confusion which alternate with active solution-focused work. No one could be expected, for example, to solve a major scientific puzzle, compose a symphony, write a novel, or produce a philosophical treatise *on demand*, and no one should *demand* a creative resolution to a major life crisis or assume that a solution to such a crisis can emerge overnight. Though an initial inspiration often arrives in a flash, such inspiration frequently requires considerable time and work to achieve its fulfillment and completion. I think there are certain problems (amongst them the collective problems of the human race: love, war, theology, meaning, etc.) which one will not resolve even over the course of a lifetime, but which nevertheless demand our immediate and sustained consideration. Some of these problems may even be "essentially contestible" and defy specific solutions. Such lack of "specificity" is not necessarily a bad thing. There is nothing, for example, that runs more contrary to a mystical conception of the Infinite or Absolute than the idea that God must be a specific, precise, definable thing; yet religions, particularly in the West, continue to propagate the notion that such a specific knowledge of 'God' and 'truth' is available to their adherents. Similarly, there may be no reason to believe that life has a specific meaning, yet the failure to find one should not result in the conviction that life is meaningless. Something can be intensely meaningful without having a precise or specifiable meaning. Certainly, if a single dream, proposition, or even word can have an indefinite, if not infinite number of meanings we should not expect life, or the universe

as a whole to have a single, determinate one. At times (though not always) those who feel that they have found a specific meaning in their lives lead lives that are overly constricted and controlled. I think that the notion of “open-beingness” gets at what I am saying here; by being open to a manifold of meanings and experiences, and not demanding ‘specificity’ to soon, one is more likely to achieve more satisfying and lasting solutions to life’s crises and conflicts.

You seem to move back and forth between psychology, philosophy and mysticism. Aren’t these really separate disciplines?

Psychology, philosophy, mysticism and theology flow seamlessly together in my understanding of the Kabbalah, much as they do in Buddhism and other eastern traditions. As the fundamental principle here is a radical open-mindedness and “open-beingness” it becomes difficult if not impossible to draw clear boundaries between disciplines and subject-matters. As I understand and practice it, psychotherapy provides an arena within which one can explore one’s emotional, sexual, aesthetic, intellectual and spiritual self, and that means crossing the boundaries of psychology, philosophy, mysticism, and theology.

Your conception of psychotherapy sounds as though it applies to basically healthy individuals who suffer from problems in living as opposed to serious mental illness. Do you also work with individuals who suffer from severe depression and/or psychosis?

As a psychologist at Bellevue Hospital for twenty years I worked with individuals with severe mental disorders and I continue to do so. As I mentioned in Part I of this dialog, psychotherapy cannot always be pursued in the same manner with severely depressed, psychotic or otherwise incapacitated individuals, and the use of more directive techniques and referral for possible psychopharmacology may, in such cases be necessary. Nevertheless, even in such cases I have found that the basic principles I have been describing, compassionate, non-judgmental listening, open and honest dialog, and a certain “unknowing” on the part of the therapist remain very important. My goal, in working with such clients, is to treat them with the greatest degree of respect for their subjectivity, difference, and freedom as possible, while at the same time attending to their more psychiatric needs. Thus, even while referring a so-called “schizophrenic” client for psychopharmacological treatment, I attempt to treat the clients as a “thou” as opposed to an “it.” For example, I always listen to a client’s presumably “psychotic productions” with compassion, interest and a measure of “unknowing,” rather than hearing them simply as indices of a mental illness. I regard such productions, in the same way as I regard dreams, as having a multiplicity of personal and communicative significances, and I endeavor to engage the client in the process of articulating and working with these significances. To take another example, I do not simply dismiss an individual’s “paranoia” as a psychiatric symptom, but rather attempt to understand it in terms of the client’s personal experience. I believe that it is particularly important in cases of severe psychopathology to provide a space within which the client can think, feel, and be heard, as it is not often the case that such individuals have lived their lives in an environment

within which they have never been permitted to express or even think and feel their own thoughts and desires. While I believe that there is a biological/genetic component to certain cases of severe mental illness, my work at Bellevue has led me to a profound appreciation of the role of trauma, abuse, neglect and de-humanization as factors in generating severe mental disturbance. My experience, in fact, is that some individuals who have been diagnosed with schizophrenia or affective disorders are indeed suffering from post-traumatic symptoms largely referable to their abusive and traumatic childhood.

How important is the therapeutic relationship in working with such individuals?

It has often been said and studies have shown, that the therapeutic relationship is the most important factor in successful psychotherapy. Indeed, the major aim of therapy is to establish a relationship with the client within which he/she feels listened to and has the space to fully express his/her thoughts, feelings and desires. As I pointed out earlier, in order to achieve this the therapist enters into an act of *Tzimtzum*, a state in which he/she is both withdrawn and fully present to the client, and in which the therapist ultimately forms an image of the client as more creative and actualized according to their own desires, rather than others' demands. This is no less true for psychotic and other severely disturbed clients, with the caveat that often such clients often require far more direction and structure in the therapeutic process than other, less disturbed, individuals. Severely disturbed clients are often overwhelmed by their own psychic productions and the therapist must assist them to achieve a better tolerance and control over these productions, before the client can profitably explore their significance. My goal, however, does not end with simply shoring up the client's defenses, but extends, as with all clients, to increasing their sense of personal autonomy and creative self-actualization.

You have spoken about the process of shedding malevolent identifications. How is this important in psychotherapy?

Human development inevitably involves a series of identifications through which the individual's gender, cultural, and personal identity is formed. An unfortunate byproduct of this process, however, is that the child inevitably identifies with certain attitudes, prejudices, emotions, moods, character traits and beliefs that other have about himself, which interfere with his/her creative self-actualization. While these identifications seem automatic, many are actually imposed upon the child through subtle or not so subtle demands made by parents and other relatives or caretakers. Such constricting identifications alienate the individual from his/her own desire and in Kabbalistic terms serve as the major source of the *Kellipot* that constrict the individual's psyche and interfere with his relationships as he matures. While it would neither be possible nor desirable to "deconstruct" and eliminate each of a client's identifications (after all, many of them are essentially positive), one of the aims of psychotherapy is to engage the client in a dialog about these identifications and his/her resultant "self-image" in order that they can be chosen and affirmed or, if need be, disengaged from. The Kabbalists, of course, held that that the human soul is created in an *infinite* divine image, not in the images of those (parents, teachers, society) who would recreate the person according to their own limited point of view. The process of psychotherapy not only assists the individual in

overcoming malevolent identifications but also in examining the attitudes and prejudices that inevitably accompany them.

Returning again to Freud, is your concept of psychic energy wider than Freud's concept of libido?

Yes, but we should remember that for the Kabbalists the basic energy of the cosmos is erotic and procreative. When the universe is lacking in harmony this is said to be because the masculine and female *Partzufim* (visages or aspects of divinity) have turned their backs upon one another and are no longer engaging in procreation. Also, for the Kabbalists, the highest *Sefirah*, *Keter* (Crown), which is even higher than *Chochmah* and *Binah* (Wisdom and Understanding) and is virtually identical with *Ein-sof* itself, is spoken of as *Ratzon* (desire) and *Tinug* (delight). These observations suggest that, for the Kabbalists, an erotically informed "desire" is at the core of the divine and, by extension, at the core of the human individual who is created in the divine image. While desire may initially be erotic it extends throughout the personality and is manifest in a wide variety of interpersonal, creative, aesthetic, spiritual and other quests. From a psychotherapeutic point of view, becoming aware of, and if possible, congruent with one's desires is an extremely important goal. Because one's upbringing and identifications have contributed to, obscured, distorted and perverted the client's desires, he or she must rediscover them through indirect psychological means. Amongst the clues to desire are one's dreams, the transference relationship with the therapists, sexual fantasies, and the thoughts and wishes that emerge in midst of in the aftermath of a life crisis. Of course, discovering one's desires does not necessarily mean that one will always act upon them. The problem for most clients, however, is that after being forbidden to act upon their desires they have lost all understanding of them, and *think they want something else*. Their forgotten desires take on a life of their own and contribute to anxiety, depression and other symptoms, as well as to repetitive patterns of behavior through which they seek satisfaction through indirect, and of self-defeating, means.

Is it ever possible, though, to arrive at what one truly wants behind the accumulation of one's "distorting and perverting" life history? After all, aren't our so-called true desires also shaped by our environment?

To answer the first question, no, one will never arrive at a rock-bottom truth regarding one's original, true desire, but I have observed that client's in psychotherapy almost always arrive at the point where they experience desires that accord better with their deeply felt emotions, potentially provide them with a greater degree of personal satisfaction and better serve their creative self-actualization than those they were acting upon prior to beginning therapy. So while there may be no absolute "truth" in these matters, it does make sense, for example, to distinguish between what Winnicott spoke of as one's "true" and "false" self, and what the existentialists spoke about as authentic and inauthentic ways of being.

With regard to the question of what shapes our desires; certainly environment plays an enormous role. It is even possible that one's deepest desires are shaped by accidental or

even malevolent forces in our childhood. However, regardless of their origins, I believe it is important for one to have a full experience of one's desires and to deeply consider how pursuing (or in some cases not pursuing) them can contribute to one's self-actualization.

The Kabbalist Isaac Luria held that “anger” was one of the greatest obstacles to spiritual development. Do you agree? Isn't one of the goals of psychotherapy to “get in touch with one's anger?”

While I do think it is very important for client's to be aware of and even experience their angry feelings, I agree that the direct expression of anger is often detrimental to one's psychological and spiritual well-being. Anger signals a problem in one's relationships; however, most often when one experiences intense anger the problem is with a relationship from the distant past.

In this regard, one might say that there are basically two types of anger; anger that one wants to express and shouldn't, and anger that one doesn't want to express but which one should. As a general rule, anger that comes upon one spontaneously and which one wants to express should not be expressed immediately and directly, as in the majority of cases it is rooted in the past rather than the present and reflects a self-focused “untherapeutic” attitude towards the other. Further, in those instances where such anger is fully warranted, a direct, hostile expression of rage will generally be self-defeating. On the other hand, anger that one only gradually discovers within oneself and which one is generally averse to expressing (because of feelings of inadequacy or fears of retaliation) probably needs to be expressed, albeit in an assertive (not aggressive) manner. This is because such “slow to recognize” anger typically reflects the individual's realization that he/she has been chronically disrespected or taken advantage of by another. In general, I believe that when you find yourself angry, you should reflect upon the causes of your own feelings (e.g. in your own personal tendencies and limitations) and upon the situation as it is likely to be understood by the one who is presumably causing your anger. If after doing so, you still believe that your rights have been violated, you should assert yourself with the other, but in a manner that leaves room for his or her response. I believe that if you practice this procedure and learn to assert yourself when appropriate you will find that you can bypass the experience of anger and move directly into more productive interpersonal exchanges.

Those who chronically experience anger have often suffered a lifetime of abuse, neglect, disrespect, etc. Their anger towards past figures greatly interferes with their current emotional life and relationships. Their work in psychotherapy will center upon working through feelings connected with the past and ultimately permitting themselves to experience emotions other than rage.

To be continued...