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Intuitive awareness: The core of therapeutic transformation

Different methods and psychotherapeutic techniques as means to bring awareness to a liberating “observing position”: A perspective unifying at the root constructivism and mindfulness practices

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Mindfulness practices and the *vision* underlying them can be summarized as a transformation process on one’s own mind and body to the purpose of “liberation”. Cultivating awareness involves the whole range of human experience, not only aspects related to dysfunctional suffering, that is the “clinical” aspects; nevertheless, these practices have a liberating power, that, as such, is also therapeutic, deconditioning. The link between these two aspects, “the liberating, therefore therapeutic, power of awareness” is the core rationale of the clinical application of mindfulness practices. Mindfulness does not aim at eliminating pain – that is, of course, impossible –, but at discovering the chance of a different kind of relationship with the universally human experience of suffering. It is amazing to discover the “degrees of freedom” that awareness – especially in its *non-discursive* modality (mindfulness) – can experiment, as to the experience of suffering. But, on closer inspection, the ultimate function of methods and techniques that apparently differ a lot from each other – such as Guidano’s slow motion, psychological tests, and many cognitive and behavioral techniques – is to foster the emergence of intuitive awareness; and, if they are used in order to intentionally provide attention with a guide, they encourage the shift to an “observing position”.

Keywords: *cognitivism, constructivism, mindfulness, intuitive awareness, observing position*

The faculty of voluntarily bringing back a wandering attention, over and over again, is the very root of judgment, character, and will. No one is *compos sui* [master of himself] if he have it not. An education which should improve this faculty would be *the education par excellence*. But it is easier to define this ideal than to give practical directions for bringing it about.

W. James, *The Principles of Psychology*, 1890, p. 424

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Mindfulness practices and the *vision* underlying them can be summarized as a transformation work process on one's own body and mind with a "liberation" purpose. The whole scope of human experience is involved in the cultivation of awareness – not only dysfunctional suffering and "clinical" aspects are involved. Nevertheless, the power of those practices is liberating and, as such, therapeutic, de-conditioning.

The essential core of mindfulness can be found in contemplative traditions that are very far from each other from a geographical, historical and cultural point of view, though expressed through languages and modalities that are unique and peculiar. Their omnipresence is suggestive of the fact that these practices work on universal processes at a radical level, that is at the roots of the human mind's functioning – and potentialities.

In this article, we refer to '*mindfulness* practices' in their specific expression within the Buddhist perspective, in particular in the great *Theravada* and *Zen-Chan* traditions. However, neither attention nor awareness (in the acception of "mental presence", of non-discursive awareness), are considered exclusively or specifically "buddhist" but, rather, universally human.

The term *mindfulness* alone, as referred to awareness practices, has only been used for a few years, as it was previously associated to the term *meditation* in the expression *Mindfulness Meditation*: this translates into English the word *vipassana*, that, in the *theravada* tradition, refers to a meditation approach whose origin can be traced back to some famous and fundamental *sutta* (teachings) of the "historical" Buddha. What must be emphasized is that, for the purpose of the present article, another translation for the word *vipassana*, exists in English, namely *Insight Meditation*. The synonymy conferred by the double translation shows how mindfulness and insight, awareness and intuition are just two sides of the same story, being intimately interrelated aspects.

Jon Kabat-Zinn, the 'mindfulness' pioneer, synthetically describes as "deep, penetrative non-conceptual *seeing* into the nature of mind and world" (Kabat-Zinn, 2003, p.146).

Bhikkhu Bodhi, a Western monk in the classic *Theravada* Buddhism tradition, as well as a great translator of the Pali Canon – Buddha's discourses conveyed through this tradition – into English, explains how, in a mindfulness meditation approach, "the two main methods applied – and the mental states to achieve – are *shamatha*, or 'concentration/stability/calm', and *vipassanā*, or 'insight/vision'; the former method leading to *samādhi*, or 'stability/deep concentration, the latter to *pañña* or 'intuitive knowledge/wisdom'. [...] According to Buddha's teachings, cultivating the meditative mind consists in the development of deep stability, hence insight. [...] "When insight shows, it leads to the highest knowledge, named 'wisdom', consisting in the intuitive vision of the real nature of things". (Bhikkhu Bodhi, 2005, p. 258)

In order to address this manner of comprehension that develops through mindfulness, Ajahn Sumedho, a distinguished Western contemporary *theravada* monk (also holder of a PhD in Philosophy) uses the expression *intuitive awareness* to trigger the intimate connection be-

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tween the cultivation of the ‘mental presence’ faculty or mindfulness (*sati* in the Pali language) and the display of insight: "...The quality of *sati-sampajañña*/intuitive awareness is used to refer to part of a continuum which begins with ‘sati’, the raw mindful cognisance of an object; the second element being ‘satisampajañña’, referring to the mindful, intuitive awareness of an object within its context; the final element is ‘sati-pañña’ – usually translated as ‘mindfulness-and-wisdom’ – which refers to the appreciation of an object in respect to its essential nature as transitory, unsatisfactory and not-self”. (Ajahn Sumedho, 2004, p. 67)

Also the Japanese *Zen-Chan* tradition, of Chinese descent, attributes great emphasis to the intuitive mind¹ and to its activation in the direct master-pupil relationship.

Jon Kabat-Zinn, along the way to advanced practice and as a meditation instructor, has been deeply influenced both by the time spent with a Korean Zen master living in the USA, and by the group of Western *vipassana* masters who are part of the Insight Meditation Society in Massachusetts. This is not a mere biographic note, but an aspect – concerning insight/intuitive vision – representing the core of the original intent of the project through which Kabat-Zinn proposed the clinical and therapeutic application of mindfulness, in the form of the so-called ‘*mindfulness-based* protocols’. In Kabat-Zinn’s intentions, such protocols aim first and foremost at fostering the development of human insight potential through concrete training, in a way that is accessible by as many people as possible. (Giommi, 2006, 2014)

In a text from 1996, written to review the experience in the two previous decades with the mindfulness-based protocol he developed starting from 1979, Kabat-Zinn very explicitly declared that the fundamental approach used in “mindfulness”, referred to as the multiple ways of applying meditation to various health care and therapy settings (...and eventually educational, psychosocial and organizational settings, too), has the cultivation of ‘wisdom’, that is intuitive comprehension/insight, as its core.

“The cultivation of mindfulness requires a significant degree of concentration but is not limited to the cultivation of concentration. Concentration here refers to the capacity of the mind to attend to a single object of observation and sustain that attention over an extended period of time. In different schools of Buddhism, concentration meditative practices (termed *samadhi* o *shamatha* practices) are sometimes introduced and practiced for extended periods of time to lay a strong foundation for the later cultivation of mindfulness (termed *vipassana* practices) while in other schools, concentration and mindfulness are cultivated together. *mentre in altre scuole la concentrazione e la mindfulness sono coltivate insieme. The latter has been the approach taken within the context of M-based stress reduction*², in part because the flexibility of attention characteristic of mindfulness lends itself to the immediate needs of people living highly complex lives within a secular rather than a carefully controlled monastic society, and in part because the training program [the mindfulness-based program called MBSR] can be made more interesting and more accessible to large numbers of people within the mainstream of society if the “wisdom dimension” characteristic of mindfulness (the capacity to discern differences non-judgmentally and to see relationships between objects of observation in a rapidly changing field of activity; and more traditionally, the cultivation of insight into the nature of suffering, into the impermanence of all phenomena, and into the question of what it means to be a “self” and a “self-in-relation”) is included from the very beginning of their exposure to meditation training”. (Kabat-Zinn, 1996, p. 162).

This is not the place for further analysis, but it is essential to know that intuitive awareness is not a simple “cognitive” faculty: it has intrinsic features of openness, curiosity, availability

¹ This is the tradition that M. Linehan refers to when she introduces, in a simplified manner, the idea of ‘wise mind’.

² Emphasis added.

to all kinds of experiences. This amounts to stating that it has an intrinsic feature of acceptance of the experience lived moment by moment.

Which is, of course, much more easily said than done – and it is not obvious at all, when we experience various degrees of the side of experience that, from the bottom of our hearts, we would like to avoid: unpleasantness, profound discomfort, pain. Mindfulness is an “active” state of awareness that requires us to have the courage to “stay with” exactly what we would not want to. It develops through practice and, as much as it may appear weird to those who do not directly experience it, it is a process that is intrinsically bound to the display of insight. As Corrado Pensa, another distinguished meditation master stated, either *sati* is “hot”, prompt, or it is not '*samma sati*', it is not real mindfulness. (Pensa, 2008)

It should be clear, now, also from what we have touched upon so far: along with the current “mindfulness” fashion, highly confusing versions of it have spread around, trivializing the potential and the depth of such practices and of what they allow us to disclose the human mind nature. It is not about relaxation techniques, aiming at reaching some kind of granted body and mind “wellness” (in its immediate meaning); nor is it about therapeutic techniques for anxiety or emotional management, or about mind and thought control (“freeing your mind... pushing negative thoughts away”). It’s not even about a sentimentalistic or moralistic “acceptance” attitude, or passive tolerance of discomfort. Again, it’s not about an easy magazine recipe on how to be ‘mindful’ and, therefore (ideally) more relaxed and ‘zen’, or even to access permanent happiness in exchange for a few minutes a day of concentration on breathing or for some other occasional exercise.

What is at stake is in fact something much deeper: intuitively penetrating the nature of human mind and observing its processes take place, as they are developing; and finding in ourselves the power to become progressively less operated by our automatic reactions, to gradually free ourselves from our usual processes, from stratified conditionings connected to our own personal, familiar and cultural history. The terms ‘automatic reactions’ and ‘conditionings’ refer here to the entire range, from everyday “normality” to clinical forms of discomfort that have become dysfunctional processing. Essentially: not a liberation from the presence of discomfort and suffering in our lives, which would be impossible; but, rather, a liberation from our ways, from the patterns of automatic reaction that we carry out when meeting someone who hurts us, and that very often generate a much more durable and intense suffering than the one we wish to escape.

What allows this increasing freedom, what gives us this power?

Not through actions, not through words we become free from mental contaminations but seeing and acknowledging them over and over (Buddha – Anguttara Nikaia).

In a mindfulness meditation perspective, this potential is granted us by *intuitive awareness*: live observation of one’s own reaction mechanisms gradually weakens them and can, in the end, de-construct them. Being “present” in one’s own mind and body experience makes room for freedom, in that it starts a process that opposes automatisms and conditioning habits. This immediate and intuitive ‘knowledge’ has a completely different nature from discursive cognitive knowledge, which is mediated by language and by ‘attributions of meaning’, and is the modality that we predominantly experience, in the absence of practice giving us intentional access to a ‘non-discursive’ modality characterized by silent and present awareness. It’s not about mere perceptual observing, not analyzing or ‘attributing meaning’ through language and, therefore, thought. It’s not an emotional and bodily “feeling”, in the sense that is commonly referred to, in psychotherapy, as a “gut feeling”.

It’s not about watching, thinking or feeling: it’s about having insight. It’s an observation carried out by silent, non-discursive, conscious awareness, that can open up to immediate and spontaneous insight. Contemplation traditions at all latitudes, as well as our Western philo-

sophical tradition – if we also consider it in its newly re-discovered dimension of transformation practice (Hadot, 2002) –, acknowledge this form of intuition as a faculty at the vertex of our mind, and virtually present in each of us. We would need much more time to better explain this essential issue¹, but what should be clear is that the intuition/insight mentioned here does not coincide with the one that is usually considered in modern *mainstream* psychology and cognitive science. That is, as a result of *bottom-up* silent, procedural, unconscious processing, (Liebermann, 2000)². It's not even 'metacognition' as a reflective discourse, or as a way of thinking referred to one's own cognitive processes. Actually, as strange as it may sound, it's not even about a cognitive activity or "representational" knowledge, with our mind building a representation in the form of an image, a symbol or a meaning. It rather resembles to 'perceiving', 'seeing' – in an immediate, often sudden, and manifest manner – what was already in our experience, and influenced it, but that until that time was not present to our awareness. One might as well say it is much more about *an act, rather than cognition/representation*: the act of intentionally directing our attention and, therefore, our awareness to it. An intention beginning with attending to the present moment, in a non-judgmental way, in order to develop a deep vision, a liberating insight.³

It should be clear by now that awareness techniques are, first and foremost, knowledge techniques: the discovery of a new, profound and highly different access from a discursive approach to our cognitive and emotional processes, or to the experience of our body and five senses. They allow us to discover the liberation power provided by intuitive awareness; to discover a kind of 'knowledge' that is also 'action', changing the states that awareness reveals, even when apparently, the conditions we are living are still the same.

Psychotherapy and dis-identification

In the clinical setting, the final aim is allowing a different kind of relationship with suffering. It's astonishing to discover the "degrees of freedom" through which awareness can experience pain. It is the discovery of a "power" that we can use at all times.

As we have seen, this liberating and therapeutic power of intuitive awareness is the core of its practical applications in the clinical – both medical and psychotherapeutic – setting, started by Kabat-Zinn, through his mindfulness-based protocols, which has eventually become predominant.

"Mindfulness", in its currently popular form (apart from the above-mentioned trivialization processes), mainly comes – both in the "style" of proposing the practice, and in its core intent – from the experimenting of a well-structured protocol that eventually served as a matrix for the ones that followed. What Kabat-Zinn ultimately aimed (and still aims) at, is an introductory path to mindfulness meditation that serves as a first step, a beginning. It consists of relatively simple practices, and it is systematic enough to allow us to learn the real sense of meditation,

¹ For a deeper analysis, see Giommi 2014, and Giommi & Barendregt, 2014.

² For instance, in ancient Greece, the kind of 'superior intuition' (*nous*) – that we are discussing here – was distinguished from intuition (*metis*), that is displayed in the form of ability, wit, sagacity, craftiness, guile: by an expert hunter, by an endowed politician, by a good doctor's instinct in diagnosis. The latter is closer to the contemporary meaning of the term; see Detienne & Vernant (1974).

³ The popular 'operational definition' of mindfulness proposed by J. Kabat-Zinn: Mindfulness is "what arises when we pay attention in a particular way: intentionally, to the present moment, non-judgementally".

through a range of exercises that are suitable for all needs. This is all promoted in a contemporary and non-religious language, although substantially loyal to the contemplation tradition concepts. It's especially meant as a suitable means (for the contemporary society living conditions) to start discovering the liberation power of awareness, by ourselves and for ourselves. It must be noted, though, that in this practical acceptance, 'mindfulness' is not a new "school" of meditation, a new approach that substitutes traditions. It is a simple, introductory path, suitable for its own purposes, limited in its depth and in time. Protocols have a duration of two months (eight weeks): obviously, they cannot compare to meditation paths with the duration and depth of a lifetime. (Giommi, 2006 and 2014)

The core of mindfulness-based protocols, though in its limited scope, is the core of mindfulness meditation proper. Such power can also be described in terms of the key notion of *dis-identification*. At the core of the transformation process is the *act* of awareness dis-identifying with the "contents" of experience, whatever they are. It must be noted, once again, that it is an *intentional act of consciousness* carried out through attention: consciousness becomes aware through it: it "sees" – in a no longer "blurred, confused" way – the phenomena it is experiencing just as phenomena, not as 'information' or 'cognition'.

The essential thesis proposed in this article is the following: the above-mentioned act of dis-identification through intuitive awareness represents the core of mindfulness meditation practical application (in the form of mindfulness-based protocols), as well as of any transformation process that we may term therapeutic.

We argue that, if we take a deeper look inside, nearly all practices, methods and techniques, though very different from each other, under the general "psychotherapy" category, ultimately operate on the basis of the same fundamental process. It's not a case, then, that in all different contemplation traditions, no matter how different from each other, in all times and places, multiple ways of cultivating attention, mental presence and insight (that is, intuitive awareness practices) are found as the core of transformation paths towards self knowledge and comprehension. (McGilchrist, 2010)

Working on oneself – whether it is driven by discomfort and suffering or by a need for self-knowledge and interior growth (is there a clear separation line, though?) – is only possible to the extent to which awareness can operate. If this were not the case, there would be no escape from being shaped by deterministic conditioning.

What is the difference, then?

We may say that awareness practices directly and intentionally aim at activating the – otherwise merely virtual – power of intuitive awareness. As for psychotherapy, this happens in more gradual and indirect ways, with various kinds of means and instruments: we believe, though, that its ultimate purpose is to foster dis-identification experiences. Moreover, psychotherapy explain the same process differently, based on explanatory models that refer to disparate theoretical and epistemological frameworks, that share a non-acknowledgment of intuition. This phenomenon causes the lack of a clear and explicit intention to develop intuitive awareness. If the focus on the heart of the therapeutic process is, instead, clear and intentional, then the many psychotherapy methods can be seen through a unifying frame as – diversified and suitable for different mind conditions and circumstances – in order to fulfill dis-identification and foster de-conditioning and liberatory *insights*.

Clinical practice as a means to allow patients/clients to discover their “observing position” through intuitive awareness

In psychotherapy proper, taking the hereby proposed perspective implies the exploration of the idea of the patient’s “observing position” as a focus of the therapeutic work and as the real place where transformation happens.

The thesis is that any authentically therapeutic process – no matter what the methods and means are –*ultimately* consists of the experience of observation of one’s own symptoms and features, directly experienced in the first person by the patient, from a different, positively non-identified “position of awareness”.

What we claim is that making the patient able to experiment, even just for a few instants, the experience of looking at him/herself from a centered ‘mental presence’, leading a curious, attentive and calm self-observation, stripped (or at least attenuated) by self-criticism and by the intention to immediately change the state of things, can lead the person to a new “observing position”, that can generate new experience of freedom and power: the possibility to freely choose new or different perspectives.

Some general points can be inferred.

a) The focus of psychotherapy moves from ‘contents’ to ‘processes’, in a perspective that is progressively interested in the mind functioning itself.

b) The whole discursive dimension – ranging from rationalistic explanations of our mechanisms, of cognitive restructuring, from more viable ‘meaning attribution’ to new and more coherent ‘narratives’, etc. – is certainly important, but not essential. Paradoxically, one may observe that a new and more suitable narrative can be very useful, but what is really relevant for the therapeutic process is having experienced effectively, in this occasion, the chance to dis-identify with a belief/representation/vision of reality that generates suffering and pathology. That is: what is really liberating is the experience of letting go, *letting go an identification with a mental content* experienced before as irrefutable reality.

c) The ‘awareness position’ shifting cannot help but involve both the patient and the therapist: first and foremost, the therapist’s state of awareness, his/her quality of ‘presence’, can invite and address the patient to experiment the new ‘observing position’, rather than words or explanations or mere emotional harmony.

For example, we’ll show which are the benefits of this perspective, integrating methods and techniques that have very different origins and theoretical references – such as Guidano’s “slow motion” technique, psychological tests, as well as some cognitive and behavioral techniques –, when used with the explicit intent to guide therapist’s and patient’s attention and to make their shift to an “observing position” easier.

Cognitive and behavioural techniques as instruments that foster intuitive awareness

Cognitive-constructivist therapies (as well as others) may just seem as paths towards transformation and liberation as they allow patients to access narratives that are different from their usual ones and from their symptoms, offering them the chance to see their suffering in a new, meaningful way. On closer inspection, though, the experience acquires the meaning of a transformation process for the patient not really (or not only) in order to build a new narrative, but rather to concretely experiment how to ‘shift’ (dis-identify) attention (and therefore expand

awareness) when moving from one narration to another. Therapies can therefore be considered as relational processes aiming at generating, within the patient, the right conditions for him/her to experience the necessary freedom and faculty to move through his/her own mental productions (even the most 'passionately' experienced, believed...and tormented ones). Such awareness, though, does not refer to the mere contents or processes, but rather to the experience of being in an "observing mind" state, that is the possibility to notice one's own mental acts, which produce contents. Awareness, escaping identification with mental contents, can discover the existence of a "position" from which experience can be observed and discovered with immediacy.

Thus, one can conceive many techniques from the behavioral and cognitive-behavioral traditions as functional methods, not aiming at removing the patient's symptom, but rather helping people develop an 'observing mind', drawing upon, in a useful (and unpretentious) way, a rigorous tradition of experiential analysis based on absolute adherence to observation, as opposed to the dominant interpretative and judgmental approach that characterizes our patients' original culture and attitude. From adherence to observation, from access to this suspension of judgment state, and from discursive silence, come intuitions, (multiple and surprising) connections among experienced phenomena.

Some examples of techniques and methods as tools for creating conditions that promote insight

(1) Carefully and attentively observing, in contrast with our cognitive and metacognitive mind's tendency to naturally produce generalization. There are many techniques, as a matter of fact, that cultivate and discipline attention training it to an increasingly lucid ability to focus and to address micro-observation to every aspect of experience. This is what self-monitoring sheets (Curatolo, De Isabella e Barbieri, 1999) are about: they draw upon experiential details, even apparently irrelevant ones, often surprisingly insightful. These sheets invite patients to record the experience at the moment it happens, or retrospectively, re-focusing it through decomposition in its parts – although they officially aim at identifying critical situations, for instance in terms of ABC (Antecedent – Belief – Consequences). The sheets therefore can serve as tools for self-regulation, as they allow the patient (by changing the observation focus) to regulate his/her emotional activation in response to a certain experience: effectively shifting the focus on the observation of the phenomenon. Through sheets people find out what it's like to 'not refuse' or avoid, but to look at the problem with curiosity, making it therefore observable and discernable; to wonder about the meaning of what is happening to themselves. This leads to a reduction in the perception of being passive victims of one's own symptoms or disorders. But ultimately, such exploration is made possible by the gradual mastery of attention, that allows dis-identification with the reactions generated by the feared experience.

(2) A further ability cultivated with tools such as diaries or self-monitoring sheets is learning "how to freak out", that is *to attribute relative value* to the patient's suffering using a numerical scale (e.g., from 0 to 100). In order to "freak out", though, the patient should necessarily attend to the present moment, to what he/she is living now, discovering that painful experience, analyzed in its effective psychophysical essence, often turns out to be much more tolerable than expected "mentally". Similarly, a specific and detailed observation as to how many times a certain symptom occurs, helps people stop generalizing, thus being confused, powerless, prey to commonplaces and prejudice. Developing awareness of the relative painfulness, intensity and frequency of the adverse experience, by calming behavioral and cognitive reactiv-

ity, allows to increase our tolerance to suffering and a sense of self as ‘powerful’. It also gives us the chance to access and linger in a mental asset that has more balance and less “energy waste”: this allows our mind to generate manifold, richer and more nourishing products than the rigid and arid ones deriving from avoidance and opposition.

(3) Most cognitive-behavioral techniques – such as behavioral ABC; ACT-Acceptance and Commitment Therapy (Harris, 2007); M. Linehan’s (1993) Chain Analysis invite us to situate each phenomenon in a *temporal dimension*. Retrieving this aspect appears crucial in that, when someone is suffering, they often lose their ability to discern and perceive their pain within a temporal arc, experiencing their symptoms as traumatic: they seem to make no sense, to be unpredictable and impossible to integrate into the historical continuum of one’s own existence. The symptom’s traumatic nature is responsible for the temporal distortion because of which we experience as present what was incomprehensibly and surprisingly experienced in the (even recent) past. This distortion brings the past to life and activates it when facing even the slightest possibility that it may happen again in the future (self-fulfilling prophecy...). The patient’s pathogenic perception, linked to the symptom’s a-temporal nature (that is, it has always been there and always will) does not allow him/her to attend to the present moment nor, therefore, to discern: the patient cannot contemporarily access awareness and memory, and realize that, at that moment, the symptom may *not* be present. Conversely, the ability to relocate events in a temporal dimension allows him/her to use awareness to discern what is real from what is not, at the moment; what passed and no longer exists, from what does not exist yet, and therefore does not exist at the moment.

Through such “temporal relocation” techniques a person cultivates the ability to increasingly cling to the present, by discerning: that is, he/she cultivates the ability to dis-identify through intuitive awareness, and broadens his/her own margins and degrees of freedom.

(4) Also tools such as the *ABC model* allow us to regain a temporal dimension – in our perspective, though, we do not want to reify temporal “sequentialization” assuming it as a linear, causal explanation; this especially applies to ABC used in a standard cognitivist way, to separate thoughts from behaviors and from emotions, in which one should carefully avoid to be biased towards putting thought and emotion in a temporal cause-effect sequence. They therefore allow us to sort out and create interconnections through a functional analysis of past, present and future elements. Likewise, one can rethink the analysis process through *Chain Analysis* as a technique through which identification and ‘fine discernment’ – ultimately, cultivation of intuitive awareness – are carried out in terms of body sensations, thoughts, emotions, actions that were taken and those that were wished for. In this sense, a crucial aspect of this technique is to help the patient understand that, *if he/she is aware and present at each of these moments*, he/she will have the chance to do something to stop that behavioral *chain*, and to make a liberating choice, through dis-identification.

(5) One of the tools that can be used in therapy to shift the patient’s attention is the Slow Motion (Guidano, 1991, 2008), a “canonical” cognitive-constructivist technique. In our perspective, it can be considered as a refined tool of attentional focalization, as it allows the person to maintain his/her attention on small details, and shifts the observation inside out of the subjective experience, back and forth through the temporal axis. The explicit aim is to reconstruct the person’s affective style through the acquisition of alternative points of view: such aim is still anchored to representational and narrative aspects related to the process of awareness development. One may try to suggest, though, that the therapeutic aspect of such mental operations ultimately descends from the fact that the person somehow “gets tired” of adhering to his/her own’s representations, which are always limited and restricted to the complexity of which one he/she gets a glimpse: the struggle of making sense of what is being experienced induces dis-identification with one’s own processes and contents, moving towards a more in-

tuitive dimension, that offers relieve, allows to trust one's own feelings and to enter a dimension in which one can participate in the experiential flow, in constant changes. What makes a difference is taking this observing position, besides the fact that the new narrative may be more viable, coherent, indulgent. If we "attach" only to this new narrative as our solution, sooner or later the impermanence of reality will make it inadequate, limiting or obsolete, and it will potentially cause more suffering.

In brief: observing, focalizing, describing, sequencing and introducing elements of interconnection are the goals of reusing tools from the cognitive-behavioral tradition, that is functional in helping patients to acquire an observing position, and therefore to order an experience that cannot either be discerned or functionally used. In this perspective, we propose to acknowledge and accept without necessarily eliminating a certain schema or process: in contrast with the behaviorist and rationalist matrix, we prefer referring to some kind of "therapy by addition" rather than "by elimination" (in the latter case, the risk is to also lose pieces of Self). From this observing position, not only does the person acknowledge and accept a certain schema or process without eliminating it, he/she also has the chance to increase his/her degrees of freedom and awareness. Such enrichment comes from the fact that, when the person realizes (observes, notes, acknowledges...) the dysfunctional, tiring, painful connection between certain sequences, he/she accesses the chance to generate an alternative: the interesting point of it is not that the person is able to construct a specific alternative, rather that he/she discovers that his/her mind is able to read reality in multiple ways, to access multiple perspectives, to make choices; this discovery makes the difference, not accessing a different representation. What makes people more self-efficacious is discovering that they have access to such potential of their minds; knowing that awareness can also 'act' through intense suffering makes us freer and gives us power, it makes us virtuous, according to an ancient acceptance of *virtus* as power. In addition, the fact that such discovery happens within the therapeutic relationship allows our mind's potential to exponentially expand, thanks to the enormous power of our consciousness to amplify and resonate in relational experience, when at least one of two partners can bring some "presence". (Kramer, 2007)

(6) What has been stated so far applies even more validly to body-based techniques, such as Slow Breathing training and Progressive Muscle Relaxation techniques, and to those more traditionally behavioral such as In Vivo Graded Exposure or Systematic Desensitization Andrews G. (2002). The goal of body-based techniques is the acquisition, through exercise and repetition, of new habits representing alternatives to one's own automatisms, thus occasions to increase the degrees of experiential freedom, starting from a position of awareness: these techniques, as a matter of fact, require training and discipline in self-observation, and continuous correlation between body activation and the importance of specific conditions, thoughts and emotions. By just focusing his/her attention on breathing, the person can immediately acquire a different position, a different attitude towards his/her disorder, as he/she is allowed to start experiencing the symptom as less alien to him/herself, but as something that potentially has its own meaning and logic. In addition, they access the chance to make the "surprising" discovery that, even just by observing their own breathing, they can intentionally change something in their habits. Similarly, working on muscle relaxation allows to develop the ability to acknowledge the tension in all body parts, discerning it from the sense of relaxation: once both conditions are acknowledged, it is easier to be able to release the tension, when needed. It is about bodily awareness exercises that allow intentional access to a position in which one has a choice – that is, experience freedom from one's own usual psychophysiological response schemas.

In vivo graded exposition is a behavioral technique according to which one should enter the feared situation gradually, through a mainly cognitive exploration of the mental representations

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of a feared situation. Actually, most of the work can be done in the studio or at home, and exposure concerns the situation very little, but is mostly related to acknowledging the rigidity and limitation of a person's mental representations of him/herself. The technique consists in helping the patient to build small "stepladders" of graded exposure to feared situations through imagination and, by negotiating and shifting representations of self and of self-in-the-situation, he is able to deconstruct, become more flexible and free from aspects of rigidity and impotence which characterize catastrophism and avoidance. Substantially, "stepladders" are tools to increase the ability of self-observation: the person can therefore start looking into his/her mental representations, and enter the scene exploring it gradually. By developing his/her own self-monitoring abilities, the patient progressively move in a way that is more coherent with his/her own sense of self-efficacy without judging him/herself.

Diagnostic tests as an opportunity rather than "objective" measures

Finally, we wish to offer some food for thought dedicated to the use, in a way that is functional to our observing perspective proposed, of psychological tests (Scrimali, Alaimo, Grasso, 2007), especially those that are most commonly used in the cognitive-behavioral tradition, such as CBA (Cognitive Behavioural Assessment) and MMPI (Minnesota Multiphasic Personality Inventory). In our perspective, such tests can be implemented into cognitive-constructivist therapy with a mindfulness orientation, in order to provide therapist and patient with a guide to attention, facilitating their shifting to an "observing position" from the early stages of an intervention.

In particular, CBA is an instrument for self-observation, as the person has to screen his/her own experience, and this allows him/her to rapidly get and discover elements that connect the symptom urgency and other aspects of his/her own life. The patient's problem is immediately put in a frame and considered as the object of an observation process (which allows to connect the symptom, from the beginning, to the person's style and history). Diving into such complexity is helpful, starting from the very first questionnaire items, in dissuading the patient from searching for univocal explanations or from being satisfied with one or more possible ways of reading events. In fact, it offers the chance to occupy a position that features curiosity, observation and judgment suspension, wait, and trust in the emergence of intuition, within the processes of meaning co-construction that will develop throughout therapy, starting from the session in which test results are communicated, and through the construction of a trust-based relationship with the therapist's intuitive mind.

Also MMPI can be usefully integrated into the proposed therapy, as it allows rapid access to the dis-identification process with the world of the patient's own representations of the world, and thoughts. The test indeed requires the person to answer "true" or "false" to over 500 items, making it clear that it is impossible to clearly define what is true and what is false, to reify the world of one's own judgment and opinions. Thus, it immediately drives the person toward potential openness and flexibility in his/her points of view. The length and of the test and its restraining nature (due to the true/false answer constraint) encourage the patient to take a position which features higher awareness as to how limited our evaluating and controlling automatism are; they also grant access to a position of higher openness to an intuitive and more creative dimension.

Also when test results are communicated, the paradoxical comparison with the multiple "psychopathology labels" makes it clear that it is impossible to be caged or constrained in a univocal explicative scheme... The narrative game in which a meaning of the psychological

profile is co-constructed – developing in the “dance” in which patient and therapist engage in order to negotiate meanings and emerging processes – gives relevance and pleasantness to the chance of accessing a position from which one can create and realize new explicative narrations or constructions.

In this perspective, we believe it is interesting to use tests, not as a means to label people, but to make them understand how they can access with curiosity the observation of the manifold subjective experience, access a fluid vision of their way of functioning, and see how their “hunger” for linearly causal explanations can soon cease. By taking a curious and observing position, people discover that any device is “good enough” to have the chance to get to know themselves more deeply. Through psychological testing, a person can get a glimpse of how much richness, flexibility and elasticity is there, beyond contents and processes; plus, from an observing position, stability can be experienced in all its complexity. People can, indeed, strongly grasp their awareness at the present moment, and acknowledge that they exist: such experience is not describable, it has to be experienced. Starting from this position, they can choose how to move, think, experience and change their perspectives.

To sum up

We aim at highlighting the evidence of deep resonance, and the chance to naturally integrate awareness practices into the constructivist framework. There is one condition, though: the constructivist framework needs to be open and not limited to a unilaterally “representational” epistemological – or, to term it more clinically, “narrative” – perspective”. Indeed, it needs to open itself to fully legitimate the *power of intuitive awareness*.

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