The nature of breathing and the potential use of breath experiments or practices has, over the past 70 years, raised a great deal of controversy in the various schools of somatic psychology as well as in various lineages of spiritual training.

The term *somatic* was coined approximately 20 years ago in the field of psychology to avoid the inherent Western dualism that refers to body as separate from anything else, whereas its effects clearly cross boundaries into all areas of human life. The term *soma* points to a unified connection between what the field of psychology usually calls mind, emotions; body awareness and spiritual concerns. In the somatic camp, one can include modalities like Reichian and Neo-Reichian breathwork, Eutony, and Sensory Awareness. In an equally rigorous fashion, one could define spirituality as the field of study that investigates practice, ritual and phenomenological experience in contradistinction to religious belief, theology and organization. Although academia often sees spirituality as a sub-branch of religious studies, one could also consider it the primary ground from which “religion” in its Western conception
developed. Appropriate to the present topic, the Latin roots of the word *spiritual* derive from the word for breath. Among spiritual schools, one can include various types of Yogic breathing, Vipassana and Zen meditation and Sufi breathing practices.

This paper does not intend to reconcile the many different approaches and opinions about this subject. It does suggest that the common stereotype in “Western” psychology that all “Eastern” breathing practices are “disembodied” and that all “Western” therapies are “embodied” is largely a language problem. In practice, the differences are more a matter of emphasis than substance. The intent of the contribution here is to re-open a dialogue that has been limited by stereotypical views held on both sides without reference to the actual functions involved.

The paper will survey some of the basic attitudes held by the main somatic psychology pioneers. Elsa Gindler, Wilhelm Reich, Gerda Alexander, and F.M. Alexander, with regards to the relationship of breath awareness to neuroticism; schizophrenia and visionary states of awareness. The paper will further suggest a conversation between these voices and selected ones from the Vipassana Buddhist Yoga and Sufi traditions.

Each somatic modality or spiritual tradition has, of course, its own mode of discourse which allows it to interpret effects in different ways. However, on a functional level, each experiment, therapy or practice involves the proprioceptive and/or kinesthetic awareness of breathing in a human body. Once trained, this awareness can lead to commonly observed and described somatic effects, however interpreted. From a social scientific point of view, the human body is the common field of such a self-study. In this regard, useful bridges between the various somatic and spiritual approaches can be found in the following four areas of inquiry central to the discussion:
1) Why is the awareness of breathing important; as defined from either a somatic or spiritual perspective? Are there differences in the way that varying traditions or modalities use the word *breath*?

2) Should one try to influence breathing directly, through a therapeutic intervention or spiritual practice? Is there a functional difference between observing the breath and changing it?

3) Does an effective breathing experiment or practice promote a fuller sense of body awareness and emotional feeling or the cessation of said body awareness and feeling? A related question involves the relative value of full awareness of the breath in all phases of inhalation and exhalation;

4) Does an effective experiment or practice, however defined, lead to the integration of body awareness; breathing and emotional feeling by a healthy “sixth sense” or functional “I” or does it lead to the extinguishing of any sense of an “I”? in this regard; can one distinguish between vision and schizophrenia in a functional way?

**I. Goals and Definitions: Why is Breathing Important?**

All somatic schools begin with a more or less common sense approach, which equates breathing with one’s ability to function in life in a healthy way. This is well expressed by the German pioneer of somatic education. Elsa Gindler, who noted in 1926:

> If we observe successful people; we can often see that they display a wonderful flexibility in reacting; in constantly changing from activity to rest. They have flexible breathing, or functional breathing. This is not easily attainable. Our students repeatedly confirm—with little satisfaction—that they need only think of an activity to feel how they immediately become rigid and impede their innate capacities. One is so used to doing it that it is difficult to abandon this nonsense.²
Among all schools and techniques, there is almost universal agreement that inhibited breathing inhibits the person in some way. As we shall see, however, there is disagreement about how to “abandon this nonsense.”

The failure to breathe in a flexible fashion is also targeted by another founder of what is now the somatic field: the German psychotherapist Wilhelm Reich. Reich, an early student of Freud, broke with his mentor over the issue of the importance of the body in therapy. In his pivotal work *Function of the Orgasm* (1948), Reich wrote that holding the breath not only created disharmony in the individual, but also in society at large, which manifested as a failure to respond to natural “vegetative” impulses:

There is not a single neurotic person who is capable of breathing out deeply and evenly in one breath….³

We see a single thread stretching from the childhood practice of holding the breath in order not to have to masturbate, to the muscular block of our patients, to the stiff posturing of militarists, and to the destructive artificial techniques of self-control of entire cultural circles.⁴

For Reich, respiration was intimately tied up with the “functional antithesis between periphery and center,” that is, the natural impulse of an organism to expand in pleasure and contract in anxiety; He related these two functions to the two poles of the autonomic nervous system:

This [hypothesis] enables us to comprehend the life process, respiration in particular, as a condition of continuous oscillation, in which the organism is continually alternating between parasympathetic expansion (exhalation) and sympathetic contraction (inhalation).⁵

In the spiritual practices mentioned above, breathing is cited as a means to enlightenment, realization, or full awareness. In his
commentary on the *Sutra on the Full Awareness of Breathing*, one of the earliest texts on Buddhist breathing practices, the Vietnamese Zen master Thich Nhat Hanh states:

> The sixteen different methods of inhaling and exhaling, in combination with the Four Foundations of Mindfulness, are the essence of the Full Awareness of Breathing Sutra. Breathing is a means of awakening and maintaining full attention in order to look carefully, long and deeply, see the nature of all things, and arrive at liberation.⁶

Various texts in the Yoga tradition also affirm that the awareness of breathing is a doorway to enlightenment. One of the oldest of these, the *Vijnana Bhairava Sutra* possibly predates the composition of the Vedas (c. 2000-1000 B.C.E).⁷ The *Vijnana Bhairava Sutra* takes the form of a dialogue between Shiva and his consort Devi. Devi begins by asking several questions. To these questions, Shiva replies with 112 suggested methods- The entire opening section is cited below:

> Devi says: 0 Shiva, what is your reality? What is this wonder-filled universe? What constitutes seed? Who centers the universal wheel? What is this life beyond form pervading forms? How may we enter it fully, above space and time, names and descriptions? Let my doubts be cleared.

> Shiva replies:

> 1. Radiant one, this experience may dawn between two breaths. After breath comes in (down) and just before turning up (out)—*the beneficence*.⁸

Likewise, the 9th century Persian Sufi mystic al-Qushayri cites traditional sayings that relate the awareness of breathing to the
remembrance of divine Unity (tawhid):

They said: “The best act of worship is to count your breaths with Allah, Most Praised and Most High” ….
Every breath that arrives upon the carpet of need without the guidance of recognition and the sign of tawhid is dead, and its master will be called to account for it.”

Similarly, the early 20th century Indian Sufi teacher and interpreter, Hazrat Inayat Khan describes how the awareness of breathing can unify the various essences (lata‘if) of the body and link these to the divine. His metaphors unite psychology with cosmology:

Breath is the very life in beings, and what holds all the particles of the body together is the power of the breath, and when this power becomes less then the will loses its control over the body. As the power of the sun holds all the planets so the power of the breath holds every organ…. Breath is a channel through which all the expression of the innermost life can be given. Breath is an electric current that runs between the everlasting life and the mortal frame.

The differences between the states of health and flexibility mentioned by Gindler and Reich; may not in fact be functionally very different from the seemingly more grandiose goals of the spiritual practitioners- Most somatic schools also make interpretations of the somatic effects of a particular experiment according to various standards of “health.” These standards are idealized states by which the therapist or educator can evaluate the client or student. The idealized somatic breath with full and natural individuality may not in function be that different from the breath of a person who sees the “nature of all things” in Buddhist terms. What we have so far could be differences attributed to the use of language.
For instance, Thich Nhat Hanh also phrases the goals for breathing practice in more modest terms:

Through awareness of breathing; we can be awake in and to the present moment- By being attentive; we have already established “stopping,” i.e., concentration of mind. Breathing with full awareness helps our mind stop wandering in confused, never-ending thoughts....

There are people who have no peace or joy and even go insane simply because they cannot stop unnecessary thinking. They are forced to take sedatives to lull themselves to sleep, just to give their thoughts a rest- But even in their dreams; they continue to feel fears; anxieties, and unease- Thinking too much can cause headaches, and your spirit will suffer.”

Likewise, the Australian educator F.M. Alexander (1932), considered the third major founder of the somatic field, equated unhealthy breathing habits with an overly active tendency to think; especially of one’s self. During one of his sessions with students in the 1920’s he was recorded as saying:

That isn’t breathing: it’s lifting your chest and collapsing...
If I breathe as I understand breathing, I am doing something wrong...
I see at last that if I don’t breathe, I breathe…

In addition, other seeming differences between the somatic and spiritual schools may center on the way each use the word “breath” itself. Somatic practitioners criticize expressions like “breathing in the heart” or “breathing in the feet” because, from a physiological standpoint neither
the heart nor the feet are involved in the exchange of gases that constitute breathing. Nonetheless, somatic practitioners speak of feeling the kinesthetic or proprioceptive awareness of breathing in various parts of the body, that is, the sensation of various tissues and organs as they respond to the action of breathing. The definition “awareness of breathing” makes a direct bridge to most of the terms used by the spiritual practitioners.

In much of the Chinese Taoist literature, the word translated as “breath” is often interchangeable with the word for chi, an energetic term; Likewise when breath is described as escaping, other than through the nose or mouth, it usually refers to perspiration. Likewise, the Yoga traditions often translate the word prana as breath; whereas this term also implies an energetic or proprioceptive relationship to the actual act of breathing. As we shall see, Reich uses the term “orgone” in a similar way to indicate a complex of breathing; energy and pulsation.

In the Middle Eastern traditions, especially those where Hebrew, Aramaic or Arabic texts are concerned, the same word (ruach, Hebrew; ruha, Aramaic; ruh, Arabic) can be translated as “breath,” “wind,” “air” or “spirit” and indicates a connection between soul and divine Unity. A different term in these languages (nephesh, Heb.; naphsha; Aram.; nafs, Arab.) can also be translated as “breath” but implies the personal self or subconscious which has not fully realized its connection with the divine.

II. Experiments and Practices: To Intervene Directly or Not?

Because mental concepts easily intrude into somatic process, as mentioned by both Thich Nhat Hanh and F.M. Alexander, a number of somatic practitioners have questioned whether one can effectively work directly with the awareness of breathing at all.

Gerda Alexander (1986), the founder of the European somatic therapy Eutony and a teacher of Moshe Feldenkrais, makes a very clear
summary of some of the difficulties in working directly with the awareness of breathing:

Action on breathing is not carried out through direct breathing exercises, but indirectly by releasing those tensions which prevent the fullness of a normal, free, unobstructed respiration. This is obstructed by tensions which may be found in the pelvic musculature, perineum, diaphragm, intercostal muscles, shoulders, neck, hands, feet, the digestive and intestinal apparatus. If these tensions can be eliminated, breathing becomes normal by itself....

In spite of the great importance we attach to breathing, we avoid mentioning it—especially in the beginning. In a group, when the word breathing is mentioned, the breathing of everyone changes. It becomes voluntary, loses its individual nuances and is then less adapted to the real and constantly changing needs of the person. For the teacher, too, it loses its value as a source of information about the psychosomatic state of the pupil...  

Other somatic therapies do approach breathing directly, but use the term “breathing experiment” in order to convey that there is no one desired result of any intervention.

The spiritual schools mentioned do not hesitate to approach the breath directly, using a “practice” or method which is intended to lead to a desired goal. A practice, such as the one described by Thich Nhat Hanh, intervenes in the student’s normal breathing pattern with a series of rhythms or manipulations, such as long and short, refined and rough, or through the right or left nostrils. In the Sufi tradition, the awareness of breath in a particular center or latifa of the body may be encouraged, for instance, breathing “in the heart.”

By breaking the established rhythm of breathing, and changing the
consciousness of the participant through the addition of a devotional or emotional component, the spiritual practice will theoretically lead one to a more natural, full, or flexible breath. Breaking the pattern will lead to a new healthier pattern if one presumes, for instance, that the divine is helping one towards health, or that the body, as an expression of the sacred, knows what its own “natural state” should be.

By contrast, a breathing experiment in the somatic therapy tradition generally takes the form of increased awareness of one’s so-called normal breathing wave. The client or student is led through various manipulations, movements or micro-movements to an increased perception of proprioceptive sensations. One simply observes the feeling of breathing without intervening.

One of the primary findings of somatic research over the past 70 years (since Gindler and Reich) has been that proprioceptive awareness—the sensation of the position in space of joints, muscles, tissue and organs on a very minute level—is not autonomic that is, it can be sensed and influenced by fine-tuning one’s awareness.

The most famous story of this in somatic therapy concerns Elsa Gindler, a teacher of Gymnastik in Germany in the 1920’s. Gindler was diagnosed with fatal tuberculosis in one lung. By fine-tuning her proprioceptive awareness, however, she taught herself to breathe solely in her healthy lung, thereby giving the diseased side a chance to heal. The fact that this was not simply labeled “spontaneous healing” by the medical establishment of the time was due to the fact that Gindler thereafter taught many others the same techniques, and started several schools of somatic therapy that still exist today.\(^{16}\)

Gindler’s intervention in her own so-called “normal” breathing saved her life. It also seems more similar to certain types of spiritual practice in that it interrupted a condition that she wished to change rather than wait for the slower more gradual method of simply observing
an already established pattern. Again, if we allow Gerda Alexander’s observation that even noticing the breath is an intervention, then the difference between “experiment” and “practice” may also fall away. Members of the somatic and spiritual schools could then usefully conduct an inquiry about which type of intervention best serves particular clients or students.

III. Breathing and Control: To Feel the Body or Not?

Reich also intervened in the breath of his patients with patterned breathing techniques that aimed to release their “vegetative” bodily impulses and breathing rhythms. Reich felt that Yoga breathing practices made it more difficult to find a naturally flexible breath; because such practices were sophisticated methods of holding the breath:

The breathing technique taught by Yoga is the exact opposite of the breathing technique we use to reactivate the vegetative emotional excitations in our patients. The aim of the Yoga breathing is to combat affective impulses; its aim is to obtain peace.... That the Yoga technique was able to spread to Europe and America is ascribable to the fact that the people of these cultures seek a means of gaining control over their natural vegetative impulses and at the same time of eliminating conditions of anxiety. However; they are not that far from an inkling of the orgastic function of life.¹⁷

Writing in the 1940’s, Reich was undoubtedly referring to the methods of extended, alternate nostril breathing and controlled holding of the breath practiced by the Patanjali school of Yoga, which were the best known in the West at that time. This school emphasizes holding fixed positions combined with fixed breathing patterns.

These particular techniques; however; are not representative of Eastern breathing science as a whole and differ fundamentally from the
oldest texts on yoga like the *Vijnana Bhairava Sutra*, according to Jaideva Singh (1979). In the *Vijnana Bhairava Sutra*, says Singh; the goal of the practices given is not “isolation of the Self” from sensation and existence, as in the Patanjali school, but instead “realization of the universe as the expression of...spiritual energy.”¹⁸ That is, the object of the practice is not cessation from bodily sensation but exploration and integration of all sensation. This is illustrated by many of the brief practices in the *Sutra*:

2. As breath turns from down to up, and again as breath curves from up to down—through both these turns, realize...

23. Feel your substance, bones, fleshy blood; saturated with cosmic essence.

38. Feel cosmos as *translucent ever-living presence*-

39; With utmost devotion, center on the two junctions of breath and know the knower.

40. Consider the plenum to be your own body of bliss.¹⁹

Paul Reps, who provided the above translations of the sutra, felt that these practices influenced those of Zen Buddhism and included them in his collection *Zen Flesh; Zen Bones*; co-authored with the Rinzai Zen teacher Nygoen Senzaki. ²⁰

Returning to Gindler’s work in 1920’s Germany, one sees a remarkable similarity between her early recommendations for a breathing therapy and the primary practice of the *Vijnana Bhairava*:

If one wishes to carry breathing all the way to completion, it is necessary to be able to carry through the four phases of breathing: inhalation, pause, exhalation, pause. These pauses and the conscious feeling of them are of the greatest importance. The pause, or rest, after
exhalation must not be lifeless. It should never be a matter of holding the breath. On the contrary; it should most closely resemble the pause we experience in music—which is the vital preparation for what is to follow.\textsuperscript{21}

Interpretation aside, all human beings experience Gindler’s four phases of breathing, and both somatic theory and spiritual practice ascribe value to experiencing them more fully.

Gindler’s work later influenced many of the major somatic breathing therapies including those of Charlotte Selver and Heinrich Jacoby. In different terms but with the same functional value, the \textit{Vijnana Bhairava Sutra} and Gindler propose that the whole person should kept in the field of awareness and sensation: the world or universe is included in the practice or experiment. Attention to the breath can then lead the student deeper into ranges of sensation that habitual breathing patterns have prevented him or her from feeling.

Again, the distinction drawn between feeling and not feeling the “body” and the “world” may hinge on a language problem, the difference between the way various modalities use these words. The contemporary Sufi scholar Seyyed Hossein Nasr alludes to this in his discussion of Sufism’s doctrine of Unity (\textit{tawhid}) and how it relates to the practitioners’ experience of the world:

Sufi doctrine does not assert that God is the world but that the world to the degree that it is real cannot other than God; were it to be so it would become a totally independent reality, a deity of its own, and would destroy the absoluteness and the Oneness that belong to God alone...\textsuperscript{22}

\textbf{IV. Integration and the Self: Who is Breathing?}
The questions concerning feeling and perception of breathing raise deeper ones, in all of the traditions and modalities surveyed here: Who or what is doing the feeling and perceiving? Does the awareness of breathing help to build a healthy “self,” however defined, or does it lead to the dissolution of the “self.”

In the somatic field, Reich’s analysis of this area is the most thorough and influential. Reich considered the detailed witnessing of small proprioceptive differences essential to his approach with patients. These differences included feelings of tension (called “armoring”) in the muscles and connective tissue arranged in rings around the eyes, throat, chest, solar plexus, genitals and pelvic floor. Reich associated this armoring with a patient’s subconscious attempts to suppress breathing, sensation and feeling.

In other patients, Reich found the reverse of armoring in these areas— an excessive softness (hypotonia) and lack of feeling. In these cases, Reich felt that patients’ awareness of bodily sensations and feelings had become “split” from their sense of identity. In extreme cases, he felt that this splitting of body awareness from identity was the functional definition of schizophrenia.

He noted in an extensive case history of a schizophrenic patient in Character Analysis (1949):

[The] degree of clarity and oneness [of consciousness] depends, to judge from observations in schizophrenic processes, not so much on the strength or intensity of self perception, as on the more or less complete integration of the innumerable elements of self-perception into one single experience of the SELF [sic]...23

Besides the abilities to see, hear, smell, taste, touch, there existed unmistakably in healthy individuals a sense of organ functions, an orgonotic sense, as it were, which was completely lacking or was disturbed in biopathies. The compulsion neurotic has lost this sixth sense completely. The schizophrenic has displaced this sense and has transformed it into certain patterns of his delusional
system, such as “forces,” “the devil,” “voices,” “electrical currents,” “worms in the brain or in the intestines,” etc.24

What the schizophrenic experiences on the level of body awareness, Reich maintained, is not so different from the experience of the inspired poet or mystic:

The functions which appear in the schizophrenic, if only one learns to read them accurately, are COSMIC FUNCTIONS; that is, functions of the cosmic orgone energy in undisguised form....

In schizophrenia, as well as in true religion and in true art and science, the awareness of these deep functions is great and overwhelming! The schizophrenic is distinguished from the great artist, scientist or founder of religions in that his organism is not equipped or is too split up to accept and to carry the experience of this identity of functions inside and outside the organism.25

Apart from the experience of a great poet or mystic, which he felt was unusual, Reich defined health as the everyday ability of a person to love, work and learn without inhibition or anxiety; The motto with which he prefaced all of his books was “Love, work and knowledge are the wellsprings of our life. They should also govern it.”

The splitting of the subconscious personality into multiple fragmented “I’s” is also a spiritual problem approached by several branches of Middle Eastern mysticism, including Sufism. Reich’s orgonotic “sixth sense” could be seen in relationship to the witnessing or gathering self in Middle Eastern psychology—In Sufi psychology this is called the awareness of “Reality” (haqiqa). In one interpretation of Jewish mystical psychology, the same function is served by the “Sacred Sense” or “Holy Wisdom” (hokhmah) which organizes the healthy sense of an “I-“ Without this gathering or witnessing awareness, which is
intimately tied up with the body’s proprioceptive awareness, the subconscious self (*nafs* in Arabic, *nephesh* in Hebrew) splits into a multiplicity of discordant voices forgetful of the divine Unity. This could be seen as a foundational view of the psyche that underlies the entire range of Middle Eastern mysticism.26

If this relative self or “I” has no ultimate existence outside of the ultimate Oneness, it is nonetheless not separate from that Oneness, according to the Sufi view. Nasr notes this in commenting upon a Sufi practitioner’s progressive relationship to body awareness:

> Although at the beginning of man’s [sic] awareness of the spiritual life he must separate himself from the body considered in its negative and passionate aspect, in the more advanced stages of the Path the aim is to keep oneself within the body and centered in the heart, that is within the body considered in its positive aspect as the “temple” (*haykal*) of the spirit.... When Rumi writes in his Mathnawi that the adept must invoke in the spiritual retreat until his toes begin to say “Allah,” he means precisely this final integration which includes the body as well as the mind and the soul.27

Another modern Sufi commentator and scientist Samuel L. Lewis (Sufi Ahmed Murad Chishti), whose work stemmed from both the Chishti Sufi and Buddhist traditions, makes similar comments to those of Reich and Nasr. In analysing the psychophysical function of various breathing practices, he states that, without an integrating sense of feeling or “heart,” held breathing practices can lead to psychological problems and even schizophrenic breaks. Lewis defined “meditation” as “heart-exercise” that leads to a greater ability to sense and feel in an integrated, compassionate fashion. This enlarged “heart” and unified perception of feeling created a greater capacity for the bio-electrical energy available
through the awareness of breathing:

Every breath raises or lowers the electrical state of the body which can be demonstrated and proven scientifically. If this power is increased without augmenting the capacity many times more—which is done by meditation—the same thing will happen and does happen to the human body as occurs to the electrical system—a fuse blows out and you have trouble....

Capacity is increased by meditation and, in general, by heart action, by maintaining the rhythm of the heart-beat, by feeling the consciousness in the heart, by directing all activity from the center to the circumference and by maintaining unity in feeling, thought and action.²⁸

In Lewis’ estimation, an effective functional approach would combine awareness of breathing with physical movement and increased awareness of sensation in the heart. This combination would provide the “unity in feeling, thought and action” he recommended in order not to “burn out the fuses.”

Up until the final stages of breathing practice, which emphasize liberation from individuality, Thich Nhat Hanh emphasizes the healthy development of an “I” existing in the present moment. He also comments on the ultimately non-dual experience of breath, body and world in his commentary on the Sutra on the Full Awareness of Breathing:

Breathing and body are one. Breathing and mind are one. Mind and body are one. At the time of observation, mind is not an entity which exists independently, outside of your breathing and your body. The boundary between the subject of observation and the object of observation no longer exists. We observe “the body in the body.”²⁹

Like Lewis, Thich Nhat Hanh recommends the integration of
breathing awareness with everyday life situations:

Most of our daily activities can be accomplished while following our breath according to the instructions in the sutra. When our work demands special attentiveness in order to avoid confusion or an accident, we can unite Full Awareness of Breathing with the task itself.... In fact, it is not enough to combine awareness of breathing only with tasks which require so much attention- We must also combine Full Awareness of our Breathing with all the movements of our body: “I am breathing in and I am sitting-“ “I am breathing in and wiping the table-“ “I am breathing in and smiling at myself.”

From the somatic point of view, F.M. Alexander (1932) also advocated an integrated approach that emphasized body awareness, breathing, intention and movement in unison, rather than specific corrective attempts to “breathe better” or “move better.” He felt this was important due to the human tendency to place “end-gaining” over the awareness of the process itself. That is, one’s desire to be more “healthy” or “liberated,” for instance, would distract one’s attention from the very process by which any progress or realization could be made:

[W]hen a person has reached a given stage of unsatisfactory use and functioning, his [sic] habit of “end-gaining” will prove to be the impeding factor in all his attempts to profit by any teaching method whatsoever.

V. Further Conversations and Mutual Inquiries

From these varied observations, one could begin to synthesize the following common ground for further discussions between somatic and spiritual practitioners regarding functional approaches to breathing experiments and practices:
1) The importance of breath, or breathing awareness, in the modalities and traditions surveyed focuses on flexible breathing as a functional goal, that is, on releasing inhibitions and blocks to “natural” functioning, however the final state of “health,” “liberation” or “realization” is conceived.

2) The functional differences between a somatic breathing experiment and a spiritual breathing practice may have less to do with differences in what is actually occurring on a psychophysical level and more to do with the differing types of students and clients, and their presenting problems, to which various practices/experiments are suited. How do the practices or modalities correspond to the profiles of students or clients who are attracted to them, or who benefit by them? Are the actual interpretations of what is going on, or what goals are projected, secondary to the client’s or student’s increased awareness of a more flexible or “natural” breath?

3) The seeming differences in strategies and goals between increasing body awareness and ignoring body awareness may again be a language problem. Can these differences be resolved by looking carefully at how each modality or tradition defines “body,” “world,” and “breath” in relation to the actual somatic sensations evoked?

4) Likewise the way that each tradition or modality defines the healthy or spiritual “self may obscure the general agreement of the various voices that the integration of a healthy sense of “I” is a prerequisite for any somatic or spiritual progress. The adage that you can’t lose a self that you never had is apropos here, and may provide the basis for further mutual inquiry.

5) Most of the voices surveyed here recommend the integration of the awareness of breathing with everyday life movement. The following possible inquiries suggest themselves for a joint approach by somatic and spiritual practitioners. If one works solely with a controlled breath over a
prolonged period of time, without any attention to body sensation, does perception tend to split off in a schizophrenic fashion, and are certain types of clients or students vulnerable to this? Alternatively, when a change does occur from such an approach, does the habitual use of the body later re-orient the breath to its old pattern, thereby making the somatic or spiritual state temporary? Likewise, does work on muscular tension or structural alignment alone (for instance, through massage or other somatic tissue work) tend to be temporary, because without integrated spiritual-emotional change, the habitual use of the breath re-creates the habitual tension.

6) The most beneficial approach to breathing and breath experiments based on this brief survey would seem to be one in which the goal was not to “breathe better,” but to increase self-awareness or self-knowledge. This intention alone might help to release breathing practices or experiments from what F.M. Alexander would call their habitual “end-gaining.” For further dialogue, the spiritual and somatic camps might benefit from using the postmodern language of social science action research. This questioning approach might help relieve the delusion of an ideal or idealized breathing pattern, because each person’s self-study would by definition be unique.

7) In conclusion, the issues around breathing, body awareness and inclusion or exclusion of sensation, open to broader cultural views of nature, in which there may be greater differences between somatic and spiritual schools than any surveyed here. In one of the mystical schools of hermeneutics in Sufism, called *ta`wil*, for example, the use of a spiritual practice corresponds to an approach to one’s own body as an expression of a natural, sacred cosmos. In this view, as Seyyed Hossein Nasr notes, the natural world can be considered a “second Quran,” and in one’s own body one may read the sacred scripture of nature. He contrasts this approach with the prevailing attitude of mainstream Western culture and
science, which places human beings in conflict with nature and their own bodies.

In other less metaphysical terms, Lao Tze relates the experience of living embedded in a cosmic ecology, in a relationship not based on fear, or its somatic equivalent, holding the breath:

The heaven, the earth and I share one breath, but each manages it individually- How could heaven and earth put me to death?³⁴

Notes


4 Ibid., p.360.

5 Ibid., p.295.


11 Nhat Hanh, 1988, pp.44,45.


17 Reich, 1948; pp.358-359

18 Singh, 1979, p.ix.


20 Reps and Senzaki, eds.. 1955;

21 Gindler, 1926, p,38.


24 Ibid., p. 454.

25 Ibid., pp. 442,448.


28 Samuel L. Lewis, “201 Suras on Breath” (Unpublished Manuscript from Archives at the Sufi Islamia Ruhaniat Society, the Mentorgarten, 410 Precita Ave, San Francisco, California, USA) pp.
29 Nhat Hanh, 1988, pA8,
30 Ibid., p. 44.

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