The Image in Medicine: Notes of a Clinician

Gerald Epstein

Most efforts analyzing how a mental process like imagery might produce physiological changes seek to uncover physiological mechanisms linking mind and body. Gerald Epstein, a therapist who uses imagery and studies the nature of the imaginal process, argues that the search of cause-and-effect mechanisms is shortsighted. The imagination, he maintains, operates by a different set of laws than those that apply to physical objects, and to understand its healing power, one must examine it in its own right rather than fit it to a framework constructed to explain the properties of physical objects. In his article, Epstein describes three patients who used imagery to resolve their very different, respective complaints (eczema, an enlarged prostate, rheumatoid arthritis in the wrists and knees) and then goes on to discuss the attributes of the imagination. The article raises central issues about the mind-body process, and we hope it will evoke a fruitful discussion.—Ed.

Over a decade ago I began my researches into the area of the therapeutic use of imagination and its derivatives, including visual imagery. I discovered through my personal experience and the effects on my patients that such a process was very powerful in producing significant change in both emotional and physical life. Following my own experience, I began to try to discern the factors that permitted an event without physical properties to exert its effects. My explorations have opened up many avenues of discovery that have been confirmed for me and for those whom I have taught and supervised for over ten years. In this discussion I shall present an extremely concise distillation of the workings of imagination. I offer it also as a response to a recent review in Advances that examined three books on imagery. The reviewers, Nicholas Hall and Patricia DuBois, wrote:

Since this basic division [the separation of mind and body] became an accepted part of the medical and scientific per-
spective, the view that the psyche and soma are importantly interconnected became a radical position. Those who held it were considered more or less unscientific and perhaps even irresponsible. To an extent, this situation still exists despite the firm evidence these three books present showing that behavioral intervention through imagery can indeed influence a wide variety of neurotic and psychosomatic problems.

But how? This is the critical scientific issue posed by imagery. Through what mechanism(s) can the mind influence an organism's response to illness, the immune response in particular?

The use of imagination and imaginative experience is quite old and is described in the ancient texts of a number of civilizations. One of the earliest descriptions of imaginal experience occurs in the Old Testament in the Book of Ezekiel. In Chapter One, Ezekiel's visionary experience is a vivid example of what we now would call a "waking dream." The prophet enters a world of phantasmagorical visions that are the stuff of dreams, yet he is fully conscious, is able to return to the world of everyday reality transformed, and can sensibly describe what has happened to him.

In the twelfth century, we find a detailed exposition of the principles and operations of imaginal life in the writings of the Islamic sage Ibn-Arabi. In the twentieth century, a host of European investigators have worked in this area, without attracting much notice. This movement produced a system of therapy called Directed Waking Dream, developed by a French therapist, Robert Desoille, in the 1930s.

In the following discussion, I will first offer a few clinical vignettes to illustrate some of the effects that the imaginal process can have on physical life. Then I will introduce several observations that seem to me germane to understanding imagination as an active process. I would ask a skeptical reader to make an effort to suspend his or her skepticism while considering what is to follow and to entertain the proposition that since it is reasonable to believe that the physical can affect the mental (as in the case of pills affecting mental life), then, conversely, it may be just as reasonable to hold that the mental can have an effect on the physical. Indeed, evidence for this proposition has been demonstrated by studies showing the use of meditation to control blood pressure and other autonomic responses. My experience has shown that a mental event—namely, imaginal activity—can affect physical illness as well.

One further point needs to be clarified. The reader should understand that imagery, in this context, is not metaphorical. The imaginal experience is always concrete, directly apprehendable by the senses. The senses at work here are the same ones we use to ascertain the external world—seeing, hearing, tasting, touching, smelling, kinesthetic and proprioceptive perception. The difference is that in imaginal activity these senses are turned inward through an act of will for the purpose of exploring the inner life. Unlike metaphor, which is literary and abstract, the sensory activity engaged in imaginal work is, like all sensory activity, thoroughly concrete. It follows from this, then, that whatever is perceived by the senses is real, though in the case of subjective imaginal experience, it cannot be validated by others.

**Imagery and Physical Health: Three Clinical Vignettes**

I shall present three short clinical vignettes to illustrate the use of imagery in treating physical problems. The first is that of a young man who came to see me with chronic eczema, which appeared on his face and other parts of his body. He had tried all forms of conventional medical treatment without lasting success and was currently using cortisone cream and gaining some relief. He understood that we would be working with imagery, and he agreed to cooperate with the treatment mode, which excluded the use of all medication. (I ask all patients, except those suffering from cancer, to stop using any medication while working with imaginal therapy.)

I directed the man to imagine the following:
See your fingers becoming palm leaves. Put the leaves on your face. Feel the flow of water and milk becoming a river of honey that heals the area. Leave a drop of oil on the healed area after finishing, seeing your face becoming all clear.*

I instructed him to do this exercise with his eyes closed three times a day for twenty-one days, at roughly the same times each day.** Before beginning the exercise he was to tell himself he was doing it with the intention of healing the eczema.

He phoned me a week later to let me know that his face had improved considerably but that he was experiencing difficulty with eczema on his body. I instructed him to imagine encasing his body with ten palm leaves using all ten fingers so as to swaddle himself in them, and see his body becoming clear. Again the patient contacted me a week later to let me know that his body had cleared up but that he was now experiencing itching. I gave him an imaginal exercise in which he was to take off his skin on the banks of a stream, to turn it inside out and wash it in the stream, then to cleanse it thoroughly, scrubbing the reversed skin with a fine golden brush. He was then to turn the skin right side out and put it back on, knowing that the itching would be gone. He contacted me one week later to tell me that the itching had stopped. He also informed me that he used to scratch himself voluntarily and purposely at the first sign of an itch because he enjoyed the physical sensation of scratching.

The scratching had the effect of increasing the itch, and would thus increase the patient’s enjoyment. After the third imaginal exercise, he found that he could control the impulse that was in fact worsening his condition.

During our work together, he became aware of how the eruption of eczema mirrored internal eruptiveness. He was soon able to put his finger (literally and figuratively) on the social context in which eruption was taking place.† After four weeks of faithfully applying his imaginal “medicine,” his skin was perfectly clear, vivid, and free of itching. He was actively making changes to improve his overall life condition.

A second patient, a man in his late forties, came to see me because he was suffering from an enlarged prostate with attendant symptoms of urinary retention and difficulty initiating the urinary stream. He was told by his physician that he would require an operation, but wanted to try this method before submitting to surgery. I began with the following exercise:

Find yourself entering your body by any opening you choose and find your prostate. When you have done this, examine it from every angle. Then see yourself placing a thin golden net encircling the prostate. The net has a drawstring that you must draw around your prostate as tightly as you can stand, then, using your stronger hand, gently massage the prostate, sensing the seminal fluid and/or urine flowing smoothly and evenly through the neck of the bladder into the urethra, down the urethra to the tip of the penis, from which you see the fluid flowing in a stream into the earth, and seeing your prostate shrinking to its normal size.

Imaginal experience allows patients to make immediate contact with their emotions and allows them to see new options for changing their behavior and attitudes. Thus, all of the patients described here became aware of different aspects of themselves. Seeing these things so quickly and clearly, patients can act and thereby promote changes in their lives. Imaginal experience cannot have any meaningful influence for the individual unless it is concretized by everyday action.

I asked him to do this exercise for six months. Before he began, he stated that his prostate was still not fully improved.

In the course of treatment, I saw the patient quickly was able to relax, and his conflict in the social context was resolved. Rather than facing surgery, A patient was able to make significant changes and improve his overall condition.

The third patient was a woman with severe rheumatoid arthritis. She had sought earlier treatment but obtained no relief. She was undertaking imagery for rheumatic nodules that had appeared in her joints. She was kinetic and agitated and very surprised when I first saw her.

The program included exercises. The patient was instructed to visualize her arms and legs as being sinewy, unblemished, and firm. She also undertook techniques for prolonging her exercises.

In the imaginal exercises (which lasted about an hour each time), after three months, she was able to walk on the beach, a facet that she had not seen before. She was able to walk without pain and told her story.
I asked him to apply this imaginal “medicine” to the affected area at least twice a day for six months before and after his busy workday. Before performing the exercise, he was to frame the intention that he was doing it so that his prostate would heal and become normal.

In the course of the treatment, during which I saw the patient once a week, the man very quickly was able to identify an important problematic social context that was related to his malfunctioning prostate and that he was able to correct. Six months later, he went to his family doctor, whom he had been seeing periodically since his enlarged prostate was discovered. An examination revealed the prostate to be of normal size, and it no longer required surgery. A two-year follow-up revealed no significant alteration in the patient’s prostate, and his overall life functioning had also markedly improved.

The third vignette concerns a middle-aged woman who came to see me because of chronic rheumatoid arthritis in her wrists and knees. She had suffered this condition for five years, taking many sorts of antiarthritis medication but obtaining little relief. At the time she undertook imagery therapy, she had a rheumatoid nodule in her right knee that measured 18 centimeters (approximately 8 inches). The patient was knowledgeable about the use of imagery and could engage actively in the relatively complex program I outlined for her.

The program involved two important exercises. The first consisted simply of seeing her arms and legs becoming like octopus tentacles, sinewy, undulating, and very long, flowing in front of her. She was then to sense them elongating freely.

In the second and far more extensive exercise (which she did completely only the first time), after closing her eyes and breathing out three times, she saw herself at a beautiful beach, a familiar place that she had visited or seen before. The sand was golden, the sky cloudless blue, and the sun bright and golden. I told her to find the place on the beach where the sand and water met, to lie down on her back at that point with the soles of her feet toward the water and to cover herself with wet sand, leaving exposed only the soles of her feet, her face, and her head. The sand and water mixture was to act as a pumice compound, cleansing her skin. Then she saw the tide coming in very quickly, entering the soles of her feet. She sensed the spiral currents of water as they washed away all the waste products there, dissolving any deposits, eliminating toxins, and clearing away any accumulations. The tide then began to go out, and the currents reversed, flowing out of her feet slowly. I instructed her to see the waste products emerging as black or gray strands being carried away on the outgoing tide.

The tide came back in quickly and again entered through the soles of her feet, then moved up into her feet and ankles, washing away all the waste products there, dissolving the debris, removing the toxins, clearing out any accumulations. As the tide went out, the spiral currents reversed. The patient then sensed them flowing from her ankles, through her feet, into the soles of her feet, and out into the tide as black or gray shreds, which were carried away. The sand and water compound thoroughly cleaned the outside of her feet and ankles. Once again the tide came back in very quickly through the soles of her feet, then passed into her feet and ankles and up into her legs and knees, washing away all the waste products, dissolving the debris, taking away the toxins, cleaning away the accumulations, as the patient sensed the spiral currents massaging the muscles, helping the ligaments and tendons to stretch, and cleaning the cartilage and kneecaps until they became gleaming white. The tide started going out, and the patient sensed the spiral currents reversing, flowing back down slowly through her legs and calves, slowly into her ankles, into her feet, and out through the soles of the feet, seeing the wastes emerge as black or gray strands being carried away in the outgoing tide, the pumice compound thoroughly cleaning the outside of her knees.

She saw the nodules disappearing, and I told
her to stand up and dive into the ocean and swim out to the horizon. I told her to see her arms and legs becoming immensely long and her torso becoming long as well. Her limbs were to move freely as she swam freestyle. As she reached the horizon, I asked her to turn over on her back and swim to shore, using a backstroke as her limbs again became immensely long and freely flowing and her torso became elongated as well. When she reached the shore, I asked her to come out of the water and let the sun dry her off. Then she would find a light gown or robe on the ground near her, which she was to put on before coming back to the chair in which she was sitting, breathing out, and opening her eyes.

I instructed the patient to apply this imaginary “medicine” three times a day for one to three minutes each time (she need not go through the exercise as extensively as she had the first time), with the intention of having the nodule disappear. She was to do this for three months. In the woman’s weekly sessions with me, she became aware of some social difficulties that were restricting her freedom. She acted on this problem, followed the imaginal prescription, and three months later went to see the rheumatologist who had been treating her for the past five years. Her physician, who had been keeping track of the size of the nodule, found that the nodule had diminished from 18 to 10 centimeters—a shrinkage of approximately 3.5 inches. During this time, she of course had stopped taking her medications.

Elements of the Imaginal Process

In this section I offer some thoughts on how imaginal activity produces its benefits. I will consider three subjects—time, the holographic character of image, and healing.

The Image Happens as “No Time”

In the world of physical reality, time is experienced as past, present, and future. Physical reality is a consensually shared world, one in which all human beings participate, since we are, in part, physical objects. The irresistible passage of time in this world has been conceptualized as an arrow moving in a single direction, like so: →. This movement indicates that all physical objects, subject as they are to the passage of time, are also concurrently subject to decay, disorganization, and disorder. This in fact is the point of the Second Law of Thermodynamics, which is generally accepted as an indisputable law governing physical systems.

The existence of time is necessary for the physical world to come into being. Objects require time in order to establish their spatial components of volume, mass, and definable limits. I would rejoin the reader to pause for a moment to consider this point: all physicality happens in time and as an unfolding of time.

Now, what about the possibility of an experience in which time does not have the linear movement of the physical world? What would such an experience be like? The absence of physical time would mean that the experience would have to be objectless. Just such a type of experience was developed millennia ago in different parts of the world. Two main processes were developed in this context: meditation and imagination. Meditation was developed for the purpose of pursuing spiritual realization, not for dealing with daily human troubles. The use of the imagination was also developed with an eye toward spiritual pursuit, but in addition, it was intended to help human beings deal with the difficulties of their daily life. Both methods prescribe an inward turning, a movement away from the physical world, the domicile of fixed time in which events are experienced as habitual, routine, and (in the Pavlovian sense) conditioned.

When we speak of image, then, we speak of something that happens outside of linear time. The image, in contrast to physical experience, happens as “no time,” in part because the imaginal event occurs all at once in the present instant. It has no history, no past, and no future, and can only be approximated in words, since it is an experiential event that is not part of a spoken event. It is a novel experience that often has no precedent or antecedent.

Image also happens as “no time” because it does not occur in a circumstance with a past, present, and future, but in a three-dimensional space—thus not time-posing in any way.

This understanding of the process toward wholeness is, as I have mentioned, toward disintegration. If we can integrate toward disintegration, we can go toward integration, creating a regained experience that is truly dimensional. We can still, perhaps, reflect on that.

In considering the production of an event of an event, of an event, the logical laws of a physical world do not hold, the deterministic laws of a physical world—that is, cause and effect, order and superposition. This is the “disorder” of the imagination, here because the chaos can be reorganized, not the main, as in natural life. Dream and rational events are in and between, the polarities of disorder and order stand in the
does not occupy a fixed point in space. Physical objects always occupy a fixed location in space, a circumstance that indicates a temporal event with a past, present, or future. Imaginal activity, on the other hand, has no fixed location in a three-dimensional spatial context and is thus not timebound. The equation I am proposing here is: no physicality = no time.

This understanding of time is useful in understanding how imaginal activity facilitates the process of healing. Healing means moving toward wholeness or integration—"coming into order," as I call it. This integrative movement stands as a polar opposite to the process of entropy, which is characterized by moving toward disorder, fragmentation, and disintegration. If we note that entropy, the moving toward disorder, takes place in physical time, we can grasp that in the movement toward integration, we are witnessing and experiencing a reversing of time—and observing an experience that is unattached to physical, spatial dimensionality. In such an event, time stands still, perhaps disappears, or it can be said to reflect negentropy, or healing.

In considering how imaginal activity can produce healing, we are considering the effects of an event mentally participated in, subjectively experienced, and operating by means of laws that do not obtain in physical life. Physical laws operate by syllogistically logical and deterministic (cause-and-effect) principles pertaining to physical objects in the physical world—that is, to any object with volume or mass. But these laws, including cause-and-effect, do not apply in a context that is non-substantial, one without volume or mass. This is the context of what generally can be called "discovered images," like those of the imagination or of dream. I bring in dreaming here because it is a universal experience that can be readily recognized as displaying, in the main, the features of atemporal, negentropic life. Dreaming is a decidedly non-logical, non-rational event, by which, I do not mean illogical and irrational. Non-logical and non-rational are polarities of logic and rationality. As such they stand in their own right as authentic and genuine experiences with their own inherent logic, a logic that it not deductive in origin.*

Though perceived as non-substantial, images have three-dimensionality. They also have great plasticity and boundless changeability. Consequently, in contrast to physical objects, they have no fixed, predictable course. They become, and are experienced as, limitless, while physical objects are limited, and the limitations are defined and perceptible.

I would summarize and integrate these observations as a set of equations. Time = limits. Timelessness = no limits. No limits = no entropy. No entropy = no breakdown. Building up = no breakdown. Building up = coming into order. Coming into order = healing. Healing requires an instant when time, which is ineluctably tied to entropy, is stilled or reversed. That instant occurs in the imagination when an individual makes use of visual imagery, which exists only in the present. The present instant is the stilling of time, and imagination is the presence of the present displayed, permitting the human being to move toward order.

So, we fight the tendency to decay through imaginal activity. The fight is joined by turning from physical to intangible, thus freeing us briefly from the grip of terminable time. Only human beings have this capacity available to them, the power consciously to will an instant of freedom.

The Image as a Hologram

As gravity is a given in the physical world, a given of the imaginal process is the image's attribute that it is a part containing the whole. The lensless photography called holography provides a scientific analogy of this condition, as is depicted in the diagram on the next page.

All non-logical systems share the property of the part containing the whole. These systems are based on the inductive process, which moves from the particular to the general, in contrast to propositional systems that are based

*In the deductive system of logic and/or rationality, the contrasting terms are illogical and irrational.
Making of a Hologram

A laser beam (laser A), or any other coherent sensory source, is fired through a semi-mirror (1). The resulting beam is deflected in two directions. One beam, called the reference beam, registers directly on a photographic plate (3) after going through a lens (2) which merely serves to widen the beam. It registers on the photographic plate as a swirl of energy or interference pattern. The other beam, called the working beam, is deflected off additional semi-mirrors while going through a lens (4) merely serving to widen the beam. This beam hits an object in space—say a human being (5)—and the beam is then deflected to the photographic plate where it meets the reference beam and is registered also as a swirl of energy or interference pattern. If a laser (laser B) is fired at the photographic plate, behind the plate where will appear the image of the human being three dimensionally suspended in space (6). If the plate were broken into fragments and a laser fired at any one fragment, the full three-dimensional image would still appear suspended in space. If the plate were further broken into fragments and a laser fired at any one fragment, the three-dimensional image would again appear suspended in space but would be less distinct. In all these situations, the part contains the whole.

on deductive logic and tend to go from the general to the specific.

Imaginal existence employs the image as the starting point for the inductive process. Image is the interface between the concrete world of everyday reality and the non-substantial world that informs it, and image is foremost among the elements human beings can use to come to know themselves as subjects rather than objects. Image points the way toward possibilities or functions that can be achieved by human beings, and at the same time, points us toward another reality, the reverse of everyday reality, its mirror image, so to speak. Image is a reflection by which we see our inner being. Inner images reflect the qualities and functions that define our individual existence. They are not produced by the brain but rather are an inner reality amenable to discovery through the functioning of the brain and inward-turning senses.

If this view of the image is not well understood, then current investigations into imagery and its functioning are destined to trivialize and demean the imaginal process, in much the same way that investigations of the dream after Freud’s glorious predictions for a trivialized the dream. Applying the logical, causal, objectively contrived process of natural scientific investigation to a fundamentally non-logical, non-rational, basically subjective experience like imagination or dreaming, is like comparing birds to camels. To try to assess the subjective-qualitative by tools appropriate to the objective-quantitative dooms the investigation from the start. Imagination and the inner world of reality do not exist "because" or "evolve like"; they just exist. They do not owe their existence to the presence of any other existent thing, as causal-deterministic thinking would lead one to believe. They speak for themselves. Imagination and imagery are simply available to people who would avail themselves of these human properties to explore the limitless realms of their being.

The Image and Healing as Wholeness

Etymologically, “heal” is derived from a word meaning whole, healthy, and holy. The image

is the appearance, and the profound and
To be more precise, a healing toward wholeness is the constant counterpoint to the aim of wholeness. I am speaking in the perspective of human processes we have examined, as I noted. The attribute of the open systems, and infinite complexity is such a perspective. The imagination and experience of the open systems of the 20th century philosophers and scientists who are operating at the boundary between entropic processes and infinite complexity and the finite mind is as may or may not have occurred. Some of the images that are pregnant with the of the physical and the

Wounds or dis-order of decay occur. Being a illness, a state of being, as in the image of the represents the complementary image of that move in the same direction. We have many systems of organisms as the self image of the self. Of being unformed, only human
The image as the process. Image and process are two conceptions of the way we come to know the world. Image is an inner, rather than objective, apprehension of the world. Inward possibilities are correlative to outward possibilities perceived by human consciousness. Image opens us to a new way of experiencing the world and the everyday reality, the physical universe. Image is a reflection of our inner being. Inner space is a space of functions that emanate from the body. They are not empty spaces, but are an inner space that constitutes our field of interacting functions of the turning senses.

The world is not well understood if one relies only on imagery. There is a need to go beyond imagery to a more concrete way of understanding the world. We need the image to help us to understand the processes that are at work in the world.

In the clinical perspective of imaginal therapy, all healing processes have a self-organizing tendency which, as I noted earlier, I call "coming into order." The attribute of self-organization is found in open systems—those with myriad possibilities and infinite options for expression. Imagination is such a system. Like dreams, the process of imagination is unlimited. There is no end of novel experience available in its range. Just as 19th-century physicists identified that a decaying, entropic process was at work in closed systems operating within the physical universe, scientists like Henri Atlan, Ilya Prigogine, and David Bohm have identified an opposite process of self-organization at work within open systems of the universe. Subject to a negentropic effect involving a building up of complexity and a coming to order, these systems may or may not be of a distinctly physical nature. Some examples of physical open systems are pregnancy and the healing of wounds. Nonphysical examples include imagination, dreams, and the effects of meditation.

Wounds, for example, represent the process of dis-ordering, in that tissue breaks down and decay occurs at the wound site. In emotional illness, a similar process takes place when disorder and attendant breakdown set in. Repair, as in the healing of wounds, or "correction" represents a building up of complexity and reverses the breakdown, a synthesis of processes that move toward wholeness. Open systems have many ways of achieving wholeness, the most exquisite being those available to human organisms, who come into existence by means of the self-organizing process known as pregnancy. Of course, once birth occurs, the human being unfortunately proceeds toward disorganization, for birth leads inevitably to death. Yet only human beings can reverse the process of entropy/dis-ordering by turning inward and finding the experience of timelessness.

Such inward-turning journeys have most often been associated with spiritual disciplines like meditation, but a more ordinary and more widespread possibility for them lies in the imagination. Inward-turning journeys present the opportunity to participate in a negentropic process in which we recognize that we need not identify ourselves solely with our physicality but that we can be one with our nonmaterial nature as well. In this imaginal process, we can bring our bodies, the objects of linear time, to the experience of wholeness.

Critiques and Responses

Skeptics will claim that what is being said here is at best "only" the result of clinical experience and perhaps even deep study, but that it does not meet the criteria of scientific proof. I should like to lay this objection to rest and at the same time stir some new thoughts about what constitutes proof.

To begin with, as I have already argued, the area known as imagination is not subject to proof by the ordinary inquiry of scientific method, which was established for the investigation of the world of measurable, objective reality—the world of material objects that are apprehensible by our five senses and characterized by volume, mass, and shape. While this method is quite suitable for dealing with the quantifiable world, it cannot be applied to a world of subjective reality such as the one in which imagination functions. What volume, mass, or three-dimensional structure can be ascribed to the imagination? Clearly it is not an object, and since it is not, the proof of its existence and functioning cannot be of the sort that holds for objects. It is therefore not scientifically sound, by the standards of scientific proof itself, to study subjective phenomena using a method established for studying objects.

There are many valid studies of the effects of imagination, and a number of journals and books are devoted to such research, but these efforts measure the physiological effects of
imaginal activity, not the workings of the imagination itself. Such studies are useful, and they support the legitimacy and worthiness of the subject, but they cannot describe anything more than the physiological correlates of imaginative events. They are scientifically consistent with the method of quantifiable measurement, but the “measure of man” goes further than the physical world of which he is part. The imagination is proof.

Another response to my discussion might be to argue that the field of psychoneuroimmunology, which studies the interaction between psychological mechanisms and bodily functions, is an example of applying scientific method to the non-quantifiable, the psychological. To this I must say, first, that psychological constructs, unlike the imagination, are not realities in themselves. Imagination is a lived, existential experience; psychology is an elaborate fiction. To the extent that psychoneuroimmunology concerns itself with psychological constructs, it is not studying a reality like imagination. On the other hand, anxiety and depression, like imagination, are lived experiences—not psychological constructs. I can agree that there is an interaction between emotional and physical responses. However, to cite a causal connection between the two, explaining subjective phenomena in language that is applicable only to the objective world, is inappropriate. I am specifically thinking here of the practice of providing psychodynamic explanations for the existence of imaginal experiences. The preconceived idea that all reality is a matter of cause and effect robs events of meaning.

To gauge the working of the imagination, we must be phenomenological in the simplest sense. We must study the phenomenon that makes its appearance to our senses, appreciating it as such, without analysis, interpretation, quantification, or measurement. The cardinal principle is to acknowledge the integrity of any and all phenomena that present themselves to our senses, whether they come from external or internal sources. Any experience in which a human being can participate is genuine, and imagination is one such experience.

Without this recognition, it is almost impossible to grasp the reality of imaginal activity, though such a perspective is not necessary to undergo the imaginal event itself. However, the experience over time becomes less meaningful, for it then is catalogued as “fantasy,” “visions,” or “hallucinations,” and is not accepted as legitimate and real.

Phenomenologically speaking, a human being lives essentially as a dwelling creature, entering into experiences one after the next, in a continuous process until he or she dies. (Readers of Heidegger will note that I am drawing on his concept of “dwelling” in the world.) The quality of a person’s life is determined by this dwelling capacity. The quantity of one’s life is determined by what one has, or what one is, which is determined by entering into experience. Both ways of being are legitimate approaches to living. Quantitative experience pertains to what we can physically measure and calculate, relating us to physical life. Qualitative experience pertains to those inner events, subjectively experienced, that are not fundamentally available to quantitative measurement. When we speak of these subjective experiences, it is imprecise to say that we have them, for they are not physical and cannot therefore be had in the sense of being possessed. It would be more correct to say that we live them or that we live in them. After all, when we dream, we are awake to subjective experience even as we are asleep to the physical world that we share with others; we are living in the dream world, our dwelling at that moment. When we awaken to the physical world, we are asleep to the dream world. Both worlds are equally real, genuine, and legitimate. It is all a matter of where we are living at the time, regardless of the experience. Be it dream world, physical world, fantasy world, memory world, or imagination world, the same “I” is going through the experience; so that wherever a person “lives” is where he or she “dwells.”

The senses not only help us to explore the physical world, as most of us assume; they also are marvelously constructed to turn toward any
subjective experience we wish them to examine. All of us can attest to the fact that subjective dream experience, for example, is a direct sensory event in which we are "seeing" or "touching" or "hearing." In this experience, our senses are automatically turned inward simply because we have gone to sleep to the external world of physical reality, and it is now the business of the senses to explore subjective reality. What most of us do not realize is that we have yet another sense, one that is especially apt for exploring subjective life on its own power, one that does not rely on being asleep to either waking or sleeping reality—namely, the imagination. This great sensory gift is a faculty of mind, a sense perception, and a subjective reality all in one. Unfortunately, we are most often asleep to imagination when we are most "awake." It might peek through from time to time, usually when we are engaged in creative activities, but most of us are unaware of the potency of the imagination as an active sensory force that is as useful as seeing, hearing, smelling, touching, and the like. It is different from the other senses in that it is not passive but can be brought into play by an effort of attention. (Indeed, imagination requires more attention than either hypnosis or meditation.) Imagination is unique in offering a new way of thinking about things. Unlike the habitual perceptions of the world that we achieve with our ordinary faculties, imagination establishes unfamiliar, fresh, and novel ways of discerning our life circumstanc- es.

Scientists who dismiss the significance and veracity of subjective phenomena until they can be established by objective criteria display a distinctly non-scientific stance. Until they can accept the genuineness of such non-material realities, they are likely to miss the richness of life experience, to misunderstand subjective events and to trivialize one of the most truly profound possibilities for self-knowledge.

Gerald N. Epstein, M.D., is assistant clinical professor of psychiatry at Mt. Sinai Medical Center, New York City, and is the author of Waking Dream Therapy (Human Sciences Press, 1981) and editor of Studies in Nondeterministic Psychology (Human Sciences Press, 1980). He co-founded and is editor-in-chief of The Journal of Psychiatry and Law and has a private practice in New York City.

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