

In his classic work, *The Varieties of Religious Experience*, William James links mystical experience to spiritual innovation and activism as well as to dissociation, incursions from the subliminal, and consciousness beyond the margin. Contemporary research strongly correlates dissociation to certain types of traumatic experience, the development of posttraumatic stress disorder, and other dissociative disorders. In light of that, and of systematic analysis of the role of trauma in the lives of the Christian mystics, recognizable patterns emerge. For in the lives of these innovators we find that trauma *does* occur, not as an exception, but consistently.

When we study the biographies of such innovators collectively, a steady pattern emerges in terms of impact and response to such trauma. We find first, the experience of trauma itself, secondly a period of disorientation, withdrawal and reorganization, and finally, illumination and the expression of a new understanding through communal or social activism. Perhaps most intriguing is the way that social activism subtly mirrors the type of trauma experienced. This paper explores different views of identification and mimesis, incorporating insights from Sandor Ferenczi, Cathy Caruth, and Ruth Leys, and then applies those perspectives to the formation of social activism in the aftermath of mystical experience. Subsequently, contemporary understandings of William James, including the work of Eugene Taylor and Ann Taves, prove critical in supporting parallels between the dissociative model of psychology used by today's researchers in dissociation and William James's poly-psychic psychological model. Greater clarity on the formative role of mimesis, combined with a poly-psychic psychological model, can

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yield greater understanding of how currents of consciousness shape the mimetic expression of the mystic as activist.

Trauma in the Lives of Mystics

Trauma in the lives of the mystics takes different forms. Trauma in the lives of male mystics is often related to a heroic quest, originates from external sources – military service, injury or imprisonment. Trauma in the lives of women mystics most often takes the form of illness. Women’s restriction to the private sphere, the somatic nature of women’s spiritual experience, and the impact of trauma on the immune system may all play a part in this high incidence of illness.¹ But as noted above, what is most consistent in the lives of these innovators, male or female, is that trauma *does* occur. It is found not just occasionally but almost universally in the lives of reformers, founders and mystics.

When you study their biographies collectively, you can recognize a larger pattern in terms of impact and response to such traumatic experience. As noted above, it usually develops in three-parts; first, the trauma itself, secondly, a period of disorientation, withdrawal and reorganization, and third, illumination and a social expression of a new understanding. This tripartite structure follows the structure proposed by Arnold van Gennep and brought to our attention by Victor Turner.² Many of us know it by the names Turner applies, “separation, liminality, and reaggregation.”³

Psycho-dynamic treatments of the mystics, many of which explicitly or implicitly followed psychoanalytic approaches, tend to focus on the middle section of this process.

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Experiences in privacy of the liminal phase come under close scrutiny. To a great extent, psychodynamic approaches decontextualize the initial traumatic experience and privatize the process. Doing so, they also divert attention from the final stage, the reaggregation, where individuals establish, “a new belief and value framework which usually creatively combines aspects of old values with new ones that have been more autonomously chosen.”⁴ The stage in which social activism emerges disappears.

But consistently in the lives of the mystic saints and reformers, after traumatic exposure, after a period of trials or “afflictions,” we find their experience offered back to the community in a new form, their contribution to social evolution. Often that response curiously echoes the nature of the trauma itself. St. John of Grenada was arrested as a wandering madman and incarcerated. His descent into madness becomes a determination to serve the insane, and his order, the hospitallers, served the mentally ill for centuries. St. John of the Cross literally almost starved to death in his impoverished childhood. In fact, his brother did starve to death. John finds voice in the “nada” poems, the celebration of the path to God through nothing. Teresa of Avila was in a coma for four days. Only her father’s stubborn insistence prevented them from burying her. She spent the last part of her life establishing convents where women could be “dead” to the world. When we list spiritual innovators, with short descriptions of the missing “reaggregation” added, we consistently see the echo of the trauma in the spiritualized social response. But what is the alchemical process by which personal tragedy becomes the fuel for social evolution, and what are the mechanics that lie behind the genesis of the spiritual innovator?

Mimesis and the Currents of Consciousness

There is a kind of oblivion that surrounds traumatic events. Literary theorist Cathy Caruth interprets this oblivion to suggest trauma as something inherently unspeakable and unrepresentable. This supports her Freudian deconstructionist approach to trauma. In that moment of oblivion, Caruth parallels the splitting of the self to an act of departure. According to Caruth “in Freud’s own theoretical explanation of trauma.... it is finally *the act of leaving* that constitutes is central and enigmatic core...The trauma of the accident, its very unconsciousness, is borne by an act of departure.”⁵ This departure from self leaves the trauma itself never really experienced or claimed, and this “unclaimed experience” cries out to be heard.” Eventually for Caruth, it leads us to “the way in which one’s own trauma is tied up with the trauma of another, the way in which trauma may lead, therefor, to the encounter with another, through the very possibility and surprise of listening to another’s wound.”⁶

But not everyone would subscribe to Caruth’s approach. Considerable controversy continues as to the mechanism by which the traumas experienced by these spiritual innovators can be transformed into social transformation and activism. In some ways dominant schools of thought on these mechanisms reflect a monistic versus pluralistic split. Freudian adherents tend to assume a monistic view of personality, a contained field, polarized by repression of libidinous desire. Freud placed “a hypnotic–mimetic process of binding and unbinding at the center of the traumatic situation.”⁷ One dictionary of psychoanalytic terms defines mimetic as “imitative; responding to the perception of another animal’s behavior with similar behavior” and mimetic

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response as “imitation, copying the behavior or appearance of other organisms.”⁸ This mimetic theory assumes a kind of identification in the traumatic experience, one that lies behind the commonly known idea of identification with the abuser. As Ruth Leys explains, ‘Trauma was...defined by Freud as a situation of unconscious identification with, or ‘primary repression’ of, the traumatic scene or person that occurs in a state akin to the trance states....’⁹ She compares this trance state to hypnosis and reminds us that Freud found the external impact, the socio-dynamic aspect so to speak, extremely problematic given his psycho-dynamic orientation. From Leys’s perspective, Freud “attempted to evade the uncanny loss of individuality or dedifferentiation between self and other that was held to take place in hypnosis by reinterpreting the effects of suggestion as the product not of the relationship between hypnotist and subject, but of the subject’s desire.”¹⁰

One of Freud’s noted early followers, Sandor Ferenczi, increasingly became disenchanted with Freud’s views. Instead of focusing on the child’s or infant’s desire, or unmet internal needs, he focused on the ways in which external sources could disrupt or shatter the infant’s world.¹¹ Ruth Leys characterizes the differences between Ferenczi and Freud. Ferenczi “had begun to stress the idea that the infant’s primordial mode of response is not a *libidinal wish* for the desired object but a *mimetic-identifactory response* that, in the absence of an ego, occurs at a stage preceding object relations and the advent of desire.”¹² Ferenczi distilled his views in a later paper, which is worth quoting at length. At the moment of the trauma, he writes:

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These children feel physically and morally helpless, their personalities are not sufficiently consolidated in order to be able to protest, even if only in thought, for the overpowering force and authority of the adult makes them dumb and can rob them of their senses. *The same anxiety, however, if it reaches a certain maximum, compels them to subordinate themselves like automata to the will of the aggressor, to divine each of his desires and to gratify these; completely oblivious of themselves as they identify themselves with the aggressor.*¹³

In the oblivion of the trauma, according to Ferenczi, “under the stress of imminent danger, a part of the self splits off in the form of a self-observing psychic instance wanting to give help...”¹⁴

The survivor is left with a divided self as a result of this traumatic split.

James’s Polypsychic Model

William James writes at length about the divided self in *The Varieties*. And in some ways James’s model is closer to Ferenczi than to Freud. The centrality of the Freudian “unconscious” suggests a polarity, a “dipsychic” approach that polarizes conscious and unconscious. As historian Eugene Taylor reminds us, for James, “there is no hypostatized unconscious, as if the unconscious were a thing or entity independent of other states. There are only multiple states of consciousness, each aware or unaware to some degree of the others.”¹⁵ **Rather than a “dispsychic” approach, James uses a “polypsychic” model.**¹⁶ **This is why he can tell his readers, that the adjective “unconscious” was “almost certainly a misnomer, is better replaced by the vaguer term ‘subconscious’ or ‘subliminal.’”**¹⁷

Historian Ann Taves has made a strong argument for the influence of French experimental psychologist Pierre Janet and British psychical researcher Frederic Myers on James. It was Janet who first coined the term “subconscious.”¹⁸ **According to Taves, Janet’s “first published report of**

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a co-conscious ‘secondary self’” appeared in 1886.¹⁹ In Taves’s argument, the main point is not the precedence – all these researchers routinely followed one another’s work. The key point, according to Taves, is that James’s reference to “the most important step forward” in psychology is actually a reference to French experimental psychologist Pierre Janet.²⁰ That step referred to “discovery of simultaneously *co-existent* states of consciousness, referred to by Janet and Myers as ‘secondary selves,’ as opposed to *alternating* (i.e. noncoexistent) personalities.”²¹

Janet provided the first widely-known experimental evidence of such “secondary selves,” and this was acknowledged by both Myers and James. This understanding of James’s psychological perspective is key for several reasons. The first is because it helps to understand why James’s psychological work was resisted and largely abandoned when the centrality of the unconscious, dominating psychoanalytic thought, came into prominence in the twenties. The second is because James’s perspective differed significantly from the subsequent generation of psychologists of religion, including George Coe and James Lueba. Third, James’s appreciation of and integration of the work of Janet into his psychological model anticipated the work of researchers in traumatic studies and dissociation almost a century later.

Another clue comes in James’s understanding of what he terms a “field of consciousness.” For James, this field of consciousness followed our attention and varied in size. “The most important fact which this ‘field’ formula commemorates is the indetermination of the margin,” he writes.²² At times when one felt happy or expansive the field might be wide. At times when we are tired or ill our field might be extremely narrow. “So vaguely drawn are the outlines between

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what is actual and what is only potential at any moment of our conscious life, that it is always hard to say of certain mental elements whether we are conscious of them or not.”²³

When the indeterminacy of these fields is combined with a model that allows simultaneously co-existent states of consciousness – some conscious and some beyond the margin of consciousness – we can begin to understand James’s polypsychic model. Terming consciousness beyond the margin *subliminal*, after Myers and Janet, James suggests that the permeability and accessibility, “the indeterminate margin” of these fields of consciousness, varies from individual to individual, and from situation to situation. Some, with little subliminal development, may rarely be aware of anything other than normal waking consciousness. Others may become involuntarily aware of subliminal content or streams, having what James terms “a strongly developed ultra-marginal life.”²⁴

James’s perspective may be better understood by examining the work of his close friend and correspondent Morton Prince. A mature summary of Prince’s views on dissociation and the formation of personality were expressed in a lecture presented at Clark University in 1924.²⁵ Prince proposed the term “neurogram” for neural records of mental or other experiences. He viewed personality as “the *sum total* of all the biological innate dispositions and tendencies of the individual and all the *acquired* dispositions and systems of dispositions...by which the mind manifests.”²⁶

Working with individuals with dissociative identity disorder, then called multiple personality disorder, Prince observed how conflicts between mental systems – constellations of

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traits that were “opposite of and antagonistic to those of the mature personality” can give birth to a new self, “with a different idea of self and self-regarding sentiment – so different that this new formed self could not consciously identify itself with the previous self. There were two selves in one body.”²⁷ This is the “divided self” which James so frequently employs in *The Varieties*, which serves as the foundation for James’s understanding of the sick souled and abrupt conversion.

Prince and James differ significantly from Freud. In a clear jab at Freud, Prince writes that the conflicts he describes “were not motivated by subconscious wishes of a hypothetical ‘libido,’ but were antagonistic *systems* motivated by various emotional instinctive tendencies.”²⁸ Echoing the monism that undergirds positivistic approaches, Freud posits one field of consciousness, a unitary conception of mind and then focuses on the interplay between dynamic elements within that mind.

Prince felt that in terms of multiple personality, the “prototypes of such alternations are to be found in normal individuals under normal conditions of everyday life,” comparing them to alterations of character we all experience in mood shifts, or in response to fatigue, stress or excitement. Prince explains, “The process is that of dissociation and synthesis, brought about by the internal forces of the dispositions of the mind.”²⁹ This does not occur in a unitary conception of mind. Prince is worth quoting at length:

In light of the findings of experimental and abnormal psychology, we must abandon the older notion of the mind being a unity, at least in the sense that all active processes are unified in consciousness and that those processes of which we are conscious include all

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mental processes. Rather we must regard the mind as a complex of units, or, rather, of unitary systems of experiences and instinctive dispositions. Such systems become organized by the experiences of life and derive their most intensive driving force from the urge of the emotional dispositions organized within them. Sentiments of love and fear and aversion and curiosity and many others, derived from the linking of these dispositions and experience, are contained in the structural systems and each has its own urge to find expression. The complex integration of all these systems in one composite whole is the mind's structure.³⁰

Prince goes on to detail how in multiple personality we see the formation of a “second self” and the dissociation and alternating repression of parallel personalities. But while all of us experience alterations in character, we do not all develop multiple personality disorder.

Prince anticipates this challenge.

The answer then, to the question you put to me, “Why do we not all split up into multiple personalities?” is plain: because we have no mental conflicts between our opposing desires and impulses *which we cannot satisfactorily adjust or control...* they are not so intense as to become a seething rebellion against the situations and conditions of life; or against our accepted ideals and sentiments; or against those codes of ethics and morals which have been instilled in us in childhood – which is to say our consciences.³¹

Prince thus links the role of conscience, the guide to ethical and moral life, to mental conflict. For some children, those described by Jerome Kagan as inhibited, “expectation of punishment or criticism may be particularly aversive. As a result, they should be expected to avoid acting in ways that will provoke these emotions.”³² This means the inhibited child is more likely to adopt standards that are less permissive, particularly in terms of moral error.

This may help to explain the deep level of scrupulosity so often found in religious innovators or reformers. But for most of us, as Prince reminds us, “the codes of ethics and morals have failed to be instilled so deeply as to be ‘categorical imperative’ principles.”³³ He

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concludes, “If there had been irreconcilable conflict, and if it had been strong enough and could not be otherwise compromised, any of the characters I described at the beginning might have been dissociated into two or more independent personalities.”³⁴

In the religious innovator – the mystic, the reformer, or the founder – we find again and again a personality in which ethical and moral codes are deeply, deeply ingrained. In their traumatic histories we also tend to find individuals exposed to long term or repetitive trauma – severe illness, imprisonment, extreme forms of injury. These long-term, inescapable forms of trauma are precisely the type thought most likely to provoke dissociative response. If one can’t change one’s situation, one changes one’s consciousness. In religious innovators, the capacity for trance or dissociation is dramatically increased at the same time as they are confronted with the grave injustice of trauma, the challenging question of theodicy and inescapable confrontation with personal suffering. These events violate one’s “basic assumptions” about safety in life, about morality, about justice.³⁵

The apparently abrupt conversion so often associated with such innovators could actually be the emergence of a newly constellated self, hammered out in a forge of inescapable pain and rebellion against suffering, what Prince terms “a seething rebellion against the situations and conditions of life.”³⁶ It may be that only the emergence is abrupt, the new personality has been formed slowly over time, in the course of the long-term traumatic experiences so often found in this group. For as Prince tells us “the enduring experiences of life are organized and conserved in complex systems in which are integrated the innate dispositions; – acquired systems they are,

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which on the psychological side are experienced and re-experienced as *sentiments* and *cognitions* and *beliefs* and *perceptions* of objects and situations and memories and images, with their *meanings...*"³⁷

The enduring experiences of the traumatic histories of religious innovators could become the foundation for a new set of cognitions and beliefs, of meaning and desire, focused on response to the very experiences that violated deeply ingrained ethical or moral values. These have taken shape in a process of "subconscious incubation and maturation."³⁸ Sandor Ferenczi would support this perspective, for as he observed, "Children have the compulsion to put to rights all disorder in the family, to burden, so to speak, their own tender shoulders with the load of all the others; of course this is not only out of pure altruism, but is in order to be able to enjoy again the lost rest and care and attention accompanying it."³⁹ In the process of putting "to rights all disorders" in the spiritual family, a personality emerges which is not simply mimetically identified with the aggressor, but fixated on the restoration of justice, deriving its satisfaction from consistently addressing that injustice, by the creation of an enduring social response. Developmental theorists have long recognized that children with less than optimal parenting take one of two tracks – modeling or reworking. Response to an absent or overly stern parent can reflect either modeling or reworking. Modeling assumes that the parent's nurturing behavior serves as a model. Yet, while there is little evidence in support of a negative modeling perspective, a considerable body of empirical evidence supports the reworking model.⁴⁰

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Current conceptualizations of dissociative disorders would suggest that the religious innovator may be midway on a scale of increasing intensity in dissociative disorders. They may, in fact, replicate many of the characteristics of complex posttraumatic stress disorder.⁴¹ In complex posttraumatic stress disorder, dissociative elements are combined with unregulated emotional responses – both positive and negative – to form a powerful, volcanic and intense character. For the last century we commonly knew such figures as Byronic. Today we recognize Byron as a disabled child who experienced prolonged child sexual abuse.

In the religious innovator, the emotionally-laden drive for the restoration of justice becomes transformed into the basic fuel for heroic virtue. The mystic as social activist is the result. It is a result that rightly deserves to be celebrated, an mysterious alchemical process through which grave injustice and evil is transformed into social good, and one which suggests ultimately that God may, indeed, write straight with crooked lines.

Representative Trauma in the Lives of Christian Innovators

SAINTS, FOUNDERS & REFORMERS

TYPE OF TRAUMATIC EXPERIENCE

"RELIGIOUS GENIUS"

Hildegard of Bingen (1098–1179)	Illness
Elizabeth of Schonau (1129–1165)	Illness
Christina Mirabilis (1150–1224)	Illness
Francis of Assisi (1182–1226)	Illness, imprisonment at Perugia
Julian of Norwich (1342–1416)	Illness
Catherine of Siena (1347–1380)	Illness (smallpox)
Joan of Arc (1412–1431)	Village destroyed by military, sister's rape, murder
Martin Luther (1483–1546)	Child abuse, beatings by parents, lightning
Ulrich Zwingli (1484–1531)	Combat, combat medic, killed in combat
Ignatius of Loyola (1491–1556)	Combat, injury at Pamplona, resetting of bones
John of God/John of Grenada (1495–1550)	Near hanging, madness and imprisonment
Teresa of Avila (1515–1582)	Illness (coma and paralysis)
Alphonsus Rodriguez (1533–1617)	Traumatic bereavement

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John of the Cross (1542–1591)	Extreme poverty, near drownings, imprisonment
Francis de Sales (1567–1622)	Illness (typhoid or paratyphoid), crisis at Padua
Jane de Chantal (1572–1641)	Traumatic bereavement
John Wesley (1703–1790)	Rescued from fire, near shipwreck in Atlantic
Therese of Lisieux (1873–1897)	Illness (tuberculosis), confinement

Representative Trauma In the Lives of Christian Innovators

<i>SAINTS, FOUNDERS & REFORMERS</i>	<i>TYPE OF TRAUMATIC EXPERIENCE</i>	<i>SOCIAL RESPONSE</i>
Hildegard of Bingen (1098–1179)	Illness	Healer, naturalist, scholar
Elizabeth of Schonau (1129–1165)	Illness	Battled church corruption, i.e., church illness
Christina Mirabilis (1150–1224)	Illness	Healer, public penitent
Francis of Assisi (1182–1226)	Illness, imprisonment at Perugia	Founder Franciscan Order mendicants, i.e. wanderers
Julian of Norwich (1342–1416)	Illness	Teacher, visionary, theologian
Catherine of Siena (1347–1380)	Illness (smallpox)	Healed schism, papal advisor
Joan of Arc (1412–1431)	Village destroyed by military, sister's rape, murder	Military commander in service of God, visionary
Martin Luther (1483–1546) tradition	Child abuse, beatings by parents, lightning storm	Founder of Lutheran rebels against "Church fathers"

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Ulrich Zwingli (1484–1531)	Combat, combat medic,	Founder of Swiss Reform “religious liberator”
Ignatius of Loyola (1491–1556)	Combat, injury at Pamplona, resetting of bones, fever crisis	Founder of Society of Jesus general of militaristic order
John of God aka John of Grenada (1495–1550)	Near hanging, madness and imprisonment	Founder of Hospitallers service to the insane
Teresa of Avila (1515–1582)	Illness (coma and paralysis) Discalced Carmelites,	Co-Founder convents for “dead to the world”
Alphonsus Rodriguez (1533–1617)	Traumatic bereavement	Spiritual director to “family” of saints
John of the Cross (1542–1591)	Extreme poverty, near drownings, imprisonment	Co-founder of Discalced Carmelites, celebrates “nothing”
Francis de Sales (1567–1622)	Illness (typhoid or paratyphoid), crisis at Padua	Founder Salesians, Co- Founder Order of Visitation
Jane de Chantal (1572–1641)	Traumatic bereavement	Co-Founder Order of Visitation for widows
John Wesley (1703–1790)	Rescued from fire, near shipwreck in Atlantic	Founder of Methodist tradition
Therese of Lisieux (1873–1897)	Illness (tuberculosis), confinement	Writer, support of missions

¹ See Lynn Bridgers, “Sacred Territory: Illness in the Lives of Women Mystics,” unpublished paper. 1997.

² Arnold van Gennep, *The rites of passage*, translated by Monika B. Uizedom and Gabriell L. Caffee, (London: Routledge and Kegan Paul, 1909); and Victor Turner, *The Ritual Process: Structure and Anti-Structure*, (New York: Aldine de Gruyter, 1969), 14.

³ Turner, *The Ritual Process*, 14.

⁴ Browning, *Religious Thought*, 91.

⁵ Cathy Caruth, *Unclaimed Experience: Trauma, Narrative and History*, Baltimore and London: Johns Hopkins University Press, 22.

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⁶ Caruth, *Unclaimed Experience*, 8.

⁷ Ruth Leys, *Trauma: A Genealogy*, (Chicago and London: University of Chicago Press, 2000), 36.

⁸ Horace B. English and Ava Champney English, “mimetic,” and “mimetic response,” *A Comprehensive Dictionary of Psychological and Psychoanalytical Terms*, (New York: Longmans, Green & Co., 1958) 323.

⁹ Leys, *Trauma*, 36.

¹⁰ Leys, *Trauma*, 36.

¹¹ See discussion in Leys, *Trauma*, 127.

¹² Leys, *Trauma*, 127.

¹³ Sandor Ferenczi, “Confusion of Tongues Between Adults and the Child/The Language of Tenderness and Passion,” Section U, Division of Psychoanalysis of the American Psychological Association, 1–7, accessed on-line at <http://www.sectionfive.org/ferenczi_article.htm> 15 October 2004, 4.

¹⁴ Sandor Ferenczi, “Child Analysis in the Analysis of Adults,” *Final Contributions to Psychoanalysis*, 136 (translation modified,” as cited in Leys, *Trauma*, 131.

¹⁵ “He appears to be rejecting ideas about the unconscious represented by the tradition of Schopenhauer and von Hartmann and put forward by British writers such as Maudsley, Carpenter and Lewes”. Eugene Taylor, *William James on Consciousness beyond the Margin*, (Princeton, NJ: Princeton University Press, 1996), 35. Taylor goes on to note that while James addressed this issue in *The Principles* he did not fully develop it until after 1890.

¹⁶ For a discussion of these two models and their streams of influence see also Henri F. Ellenberger, *The Discovery of the Unconscious*, (New York: Basic Books, 1970), 145–147.

¹⁷ James, *Varieties*, 207.

¹⁸ Henri F. Ellenberger, *The Discovery of the Unconscious*, (New York: Basic Books, 1970), 406.

¹⁹ Ann Taves, “Religious Experience and the Divisible Self: William James (and Frederic Myers) as Theorist(s) of Religion,” *Journal of the American Academy of Religion*, June 2003, Vol. 71, No. 2, pp. 303–326, 307. Taves is cites Pierre Janet’s “Les actes inconscients et le dédoublement de la personnalité pendant le somnambulisme provoqué,” *Revue philosophique* 22: 577–592.

²⁰ Henri F. Ellenberger, *The Discovery of the Unconscious*, (New York: Basic Books, 1970), 406.

²¹ Taves, “Religious Experience and the Divisible Self...” 307.

²² James, *Varieties*, 232.

²³ James, *Varieties*, 232.

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²⁴ James notes, “The most important consequence of having a strongly developed ultra-marginal life of this sort is that one’s ordinary fields of consciousness are liable to incursions from it of which the subject does not guess the source, and which, therefore, take for him the form of unaccountable impulses to act, or inhibitions of action, of obsessive ideas, or even of hallucinations in sight or hearing....In the wonderful explorations by Binet, Janet, Breuer, Freud, Mason, Prince, and others, of the subliminal consciousness of patients with hysteria we have revealed to us whole systems of underground life, in the shape of memories of a painful sort which lead a parasitic existence, buried outside of the primary fields of consciousness, and making irruptions thereinto with hallucinations, pains, convulsions, paralyses of feeling and of motion, and the whole procession of symptoms of hysteric disease of body and mind.” James, *Varieties*, 235.

²⁵ Morton Prince, Powell Lecture in Psychological Theory at Clark University, 17 December 1924. The lecture was then published as “Chapter XI, The Problem of Personality: How Many Selves Have We?,” *Psychologies of 1925: Powell Lectures in Psychological Theory, Third Edition*, Ed. Carl Murchison, (Worcester, Massachusetts: Clark University Press, 1928) 245–271.

²⁶ Prince, “Problem of Personality,” 247.

²⁷ Prince, “Problem of Personality,” 263.

²⁸ Prince, “Problem of Personality,” 263.

²⁹ Prince, “Problem of Personality,” 263–264.

³⁰ Prince, “Problem of Personality,” 264.

³¹ Prince, “Problem of Personality,” 267.

³² Kagan, *Galen’s Prophecy*, 239.

³³ Prince, “Problem of Personality,” 267.

³⁴ Prince, “Problem of Personality,” 268.

³⁵ Ronnie Janoff-Bulman, “The Aftermath of Victimization: Rebuilding Shattered Assumptions,” *Trauma and Its Wake*, Charles R. Figley, Ed., New York: Brunner/Mazel, 1985, 5–33.

³⁶ Prince, “Problem of Personality,” 267.

³⁷ Prince, “Problem of Personality,” 270.

³⁸ Prince, “Problem of Personality,” 270.

³⁹ Sandor Ferenczi, “Confusion of Tongues Between Adults and the Child/The Language of Tenderness and Passion,” Section U, Division of Psychoanalysis of the American Psychological Association, 1–7, accessed on-line at <http://www.sectionfive.org/ferenczi_article.htm> 15 October 2004.

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⁴⁰ John Snarey, *How Fathers Care for the Next Generation: a four-decade study* (Cambridge, MA: Harvard University Press), 1993.

⁴¹ Ellert Nijenhuis, May 30, 2003, Presentation, "Dissociation and Action Systems: A Psychobiological Perspective on Trauma-Induced Dissociative Phenomena," Psychological Trauma: Maturation Processes and Therapeutic Interventions, Boston, May 30-31, 2003.