



Altered States of Consciousness

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In general terms, an altered conscious state can be defined as a mental state which can be subjectively recognised by an individual, or by an observer of the individual, as representing a difference in psychological functioning from that individual's "normal," alert, waking state. Twenty states of consciousness have been identified, with considerable overlap, as worthy of further study.

Very little experimental work has been done in the area of consciousness – what William James referred to as "the stream of thought." It was once thought that the electroencephalograph might provide a reliable indicator of states of consciousness, but the wide variety of electrical patterns observed has made the relationship between cortical electrical activity and states of consciousness a very complicated one, especially as anything resembling the Mind Mirror has not been available for this work.

The following is the provisional list of states of consciousness.

1 – **The Dreaming State** can be identified on the electroencephalograph by noting periods of rapid eye movement, representing the 'following' of dream images, and the absence of 'slow' brain waves. The dreaming state occurs periodically during the night as part of the sleep-dream cycle.

2 – **The Sleeping State** can be identified on the EEG by an absence of rapid movements and by a gradually emerging pattern of 'slow' brain waves. A person awakened from sleep will usually give a brief verbal report, which differs considerably from dream reports; this brief verbal report indicates that mental activity is present during the sleeping state as well as during the dreaming state. It will be an interesting task to identify these waves in Mind Mirror traces.

3 – **The Hypnagogic State** occurs between wakefulness and sleep at the onset of the sleep-dream cycle. It is often characterised by visual images and sometimes includes auditory imagery as well; both types of imagery differ from mental activity experienced during sleeping and dreaming states.

4 – **The Hypnopompic State** occurs between sleep and wakefulness at the end of the sleep-dream cycle. At times, it is characterised by visual and/or auditory imagery, differing qualitatively from forms of mental activity which occur during sleeping and waking.

5 – **The Hyperalert State** is characterised by prolonged and increased vigilance while one is awake. It can be induced by drugs which stimulate the brain, by activities which demand intense concentration, or by measures necessary for survival during military operations, such as crow's nest watch and sentry duty.

6 – **The Lethargic State** is characterised by dulled, sluggish mental activity. It can be induced by fatigue, sleep deprivation, malnutrition, dehydration, improper sugar balance, drugs that depress brain activity or by despondent needs and feelings.



7 – **States of Rapture** are characterised by intense feelings and overpowering emotion, subjectively evaluated as pleasurable and positive in nature. These states can be induced by sexual stimulation, frenzied dances (e.g., the “whirling dervishes”), orgiastic rituals (e.g., witchcraft and voodoo), rites of passage (.e.g., primitive puberty initiations), religious activities and drugs.

8 – **States of Hysteria** are characterised by intense feelings and overpowering emotions, subjectively evaluated as negative and destructive in nature. These states can be induced by rage, anger, jealousy, panic, fear, terror, horror, fear of being “bewitched” or “possessed”, violent mob activity (e.g., “lynching parties” or “running berserk”), psychoneurotic anxiety, and certain drugs.

9 – **States of Fragmentation** are characterised by a lack of integration among important segments, aspects, or themes of the total personality. These states parallel conditions referred to as psychotic, severe psychoneurosis, dissociation, ‘multiple personality’, amnesia and fugue episodes, in which someone forgets his past and begins a new life pattern. These states, which may be either temporary or long-lasting, can be induced by certain drugs, physical trauma to the brain, psychological stress, physiological predispositions (which interact with psychological stress in some types of schizophrenia), and experimental manipulation, such as sensory deprivation and hypnosis.

10 – **Regressive States** are characterised by behaviour that is clearly inappropriate in terms of the individual’s physiological status and chronological age. These states may be temporary or long-lasting. For example, a person may undergo “age regression” as a result of experimental manipulation through hypnosis or drugs, or may be suffering from various types of senility.

11 – **Meditative States** are characterised by minimal mental activity, the lack of visual imagery, and the presence of continuous alpha waves on the EEG. They may be induced by lack of external stimulation or by meditative disciplines, e.g. Yoga or Zen.

12 – **Trance States** are characterised by the absence of continuous alpha waves on the EEG, hypersuggestibility (but not passivity), alertness, and the concentration of attention on a single stimulus, and feeling “at one” with the stimulus without responding to other stimuli, thus making possible such phenomena as post-hypnotic suggestions. These states may be induced by the voice of a hypnotist, listening to one’s heartbeat, chants, prolonged watching of a revolving object such as a drum, stroboscope, or metronome; trance-inducing rituals, repetitive grilling (e.g. “brainwashing”, “getting the third degree”), trance-inducing material like a lullaby or music or a charismatic speaker, watching a dramatic presentation and becoming ‘caught-up’ in the action, or performing a task which requires attentiveness but which involves little variation in response.

13 – **Reverie** is frequently characterised by rapid eye movements on the EEG but occurs during trance. Typically, the state is experimentally induced by a hypnotist who suggests that the individual will have a dreamlike experience.

14 – **The Daydreaming State** is characterised by rapidly occurring thoughts which bear little relation to the external environment. It may occur with the eyes open or closed; when the eyes are closed, the visual images may appear, and rapid eye movements may occur. Daydreaming



may be induced by boredom, social isolation, sensory deprivation or spontaneously occurring periods of reverie and fantasy.

15 – **Internal Scanning** is characterised by awareness of bodily feelings in the organs, tissues, muscles, etc. Consciousness is always present but exists on a non-reflective level unless there is a concerted effort on the part of an individual to become aware of those feelings or unless the bodily feelings are intensified by pain, hunger, etc.

16 – **Stupor** is characterised by a suspended or greatly reduced ability to perceive incoming stimuli. Motor activity may be possible, but its efficiency is greatly reduced; language may be used, but only in a limited and often non-meaningful way. Stupor may be induced by certain types of psychosis or by certain drugs, like opiates or large quantities of alcohol.

17 – **Coma** is characterised by an inability to perceive incoming stimuli. There is little motor activity and no use of language. Coma may be induced by illness, toxic agents, epileptic seizures, trauma to the brain, or glandular dysfunction.

18 – **Stored Memory** involves past experience, which is not immediately available to an individual's reflective awareness. Nevertheless, the memory traces (or "engrams") of past events always exist on some level of the individual's consciousness. They may be recalled by conscious effort, they may be evoked by electrical or chemical stimulation of the cortex of the brain, they may be produced through psychoanalytic free association, or they may emerge spontaneously.

19 – **"Expanded" Conscious States** – Satori, Cosmic Consciousness. These states are characterised by a lowered sensory threshold and the abandonment of habitual ways of perceiving the external and/or internal environment. Although these "expanded" states may occur spontaneously or may be induced through hypnosis or sensory bombardment, they are frequently brought about experimentally by the use of psychedelic or mind-manifesting drugs. Typically, these states progress along four different levels: **sensory, recollective-analytic, symbolic, and integral**. At the sensory level, there are subjective reports of alterations in space, time, body image, and sensory impressions. At the recollective-analytic level, novel ideas and thoughts emerge concerning the individual's psychodynamics or conception of the world and his role in it. At the symbolic level, there is an identification with historical or legendary persons, with evolutionary recapitulation, or with mystical symbols. At the integral level, which very few individuals ever manage to attain, there is a religious and/or mystical experience in which God (or the "Ground of Being") is confronted or in which the individual has the subjective impression of dissolving into the energy field of the Universe (e.g., Satori, Samadhi, Oceanic Unity, Cosmic Consciousness, Peak Experience, to give a few of the names with which this phenomenon has been blessed).

20 – **The Waking State**. The twentieth state of consciousness is, of course, the "normal", everyday, waking state, characterised by logic, rationality, cause-and-effect thinking, goal-directedness and the feeling that one is "in control" of one's mental activity.