

Yoga Therapy using Japanese Naikan Meditation for Psychosomatic Illness, a “Self-Analysis Approach”

Japan Yoga Niketan

Keishin KIMURA

<Abstract>

The increase of Stress-induced psychosomatic diseases in modern society has shown the limitations of western medicine and the need for alternatives. Because psychosomatic diseases are physical illnesses caused by unhealthy conditions of the mind, we believe that the best way to treat them is to help patients recognize their own unhealthy states of mind through self-analysis and show them how they can work to bring their minds into balance. We have found that the practice of Patanjali's eight steps of yoga can be used effectively to heal the root of these psychosomatic diseases in this way.

The practice of Patanjali's Ashtanga Yoga increases our awareness and brings our body and mind into balance through integration, purification, and transcendence step by step, beginning at the lowest level with our social relationships and reaching up to the subtlest level or highest Truth, which is our Real Self or Atman. The Taittiriya Upanishad also mentions five layers of existence, or five selves: food, vital force, mind, intellect, and bliss. By merging these two theories in our Yoga therapy activities we can show the integral connection between the mind and the physical body, and help our patients understand how they can improve their physical health by changing the way they relate to their world. We guide the patients in self-analysis so that they can change their outlook by gaining a better understanding of themselves and others. For that purpose we use Naikan, a Japanese meditation technique that helps the patients look within.

Below are the eight steps of Patanjali's Yoga Sutras showing the different stages or aspects of ascent in understanding oneself, and how they fit together with the Taittiriya Upanishad's Pancha Koshas or five sheaths:

- 1) *Yama*: Five vows of restraint for self-control of destructive behavior towards others.
- 2) *Niyama*: Five observances for a foundation of spiritual life.
- 3) *Asana*: Understanding the Food Sheath (Annamaya Kosha) or physical body.
- 4) *Pranayama*: Steadying the *prana* or Vital-Air Sheath (Pranamaya Kosha).
- 5) *Pratyahara*: Transcending the senses through the Mind Sheath (Manomaya Kosha).
- 6) *Dharana*: Practicing concentration through the Mind Sheath (Manas/Manomaya Kosha).
- 7) *Dhyana*: Meditation using the Intellect Sheath (Buddhi/Vijnanamaya Kosha).

8) *Samadhi*: Trance using the Bliss Sheath (Ahamkara, Chitta/Anandamaya Kosha).

In Japan we are combining this yoga with a Japanese introspective technique called Naikan for the treatment of psychosomatic illnesses. In this paper, we will explain Naikan and report how our yoga therapy students in Japan are using it in their practice of the *yamas* to become healthier, well-balanced individuals.

Preface

The increase of Stress-induced psychosomatic diseases in modern society has shown the limitations of western medicine and the need for alternatives. Because psychosomatic diseases are physical illnesses caused by unhealthy conditions of the mind, we believe that the best way to treat them is to help patients recognize their own unhealthy states of mind through self-analysis and show them how they can work to bring their minds into balance. We have found that the practice of Patanjali's eight steps of yoga can be used effectively to heal the root of these psychosomatic diseases in this way.

Practice of Patanjali's Ashtanga Yoga increases our awareness and brings our body and mind into balance through integration, purification, and transcendence step by step, beginning at the lowest level with our social relationships and reaching up to the subtlest level or highest Truth, which is our Real Self or Atman.(1) The Taittiriya Upanishad also mentions five layers of existence, or five selves: food, vital force, mind, intellect, and bliss. By merging these two theories in our Yoga therapy activities we can show the integral connection between the mind and the physical body, and help our patients understand how they can improve their physical health by changing the way they relate to their world. We guide the patients in self-analysis so that they can change their outlook by gaining a better understanding of themselves and others. For that purpose we use Naikan, a Japanese meditation technique that helps the patients look within.

The traits of psychosomatic diseases are:(2)

1. lack of emotion
2. lack of imagination
3. inability to verbalize conflicts
4. lessened experiencing and expressing of emotion
5. describing endless details rather than feelings
6. difficulty in communicating with the interviewer
7. less awareness of the needs of the physical body
8. over-adaptation.

The following is a profile of psychosomatic patients:

1. serious-minded
2. workaholic
3. well-behaved
4. a "sticker"
5. can't say "NO"

6.self-sacrificing

7.good-natured.

Psychosomatic diseases are generally divided into two groups: 1) Real Psychosomatic diseases, which are related to the stress of real daily life, and 2) Personality Psychosomatic diseases, which are related to the personality of the patient. Since under the same real daily stresses there are some people who do not develop stress-related diseases, we think that all psychosomatic diseases are rooted in the way the patient relates to the world.

Swami Vivekananda said that pleasure and pain leave upon our soul different pictures, and the result of these combined impressions is what is called man's character. The character of any man is really but the aggregate of tendencies, the sum total of the bent of his mind; and in some instances, misery is a greater teacher than happiness.(3) So, we have started treating psychosomatic illnesses with a combination of yogic techniques and Naikan meditation and found that as patients gained a better understanding of themselves, they became healthier.

Patanjali's eight steps of yoga are the foundation of our yoga therapy program in Japan. For more than ten years we have worked with Vivekananda Yoga Research Foundation in Bangalore, India, to organize Yoga Therapist Instructor Courses and conduct yoga therapy treatment. In this paper we will present some activities of our yoga therapy program in Japan.

PATANJALI'S ASHTANGA YOGA, AND THE TAITTIRIYA UPANISHAD'S THEORY OF THE FIVE SHEATHS OR LAYERS OF EXISTENCE

The Upanishadic tradition uses a four-step system for finding Reality, as follows:(4)

1. Shravana (Hearing)
2. Manana (Contemplation)
3. Nididhyasana (Deep Meditation)
4. Jnana (Realization)

We begin our Yoga Therapy with Shravana, hearing the philosophy of Patanjali and how it corresponds to the sheaths of the Taittiriya Upanishad. We explain to them that the first two steps in Ashtanga Yoga, the Yamas and Niyamas, build a foundation of understanding and self-control at the level of social relationships and dealing with the outer world. The third level, Asana, works on our physical body, the Food Sheath (Annamaya Kosha). The fourth level, Pranayama, focuses on stabilizing the breath or Vital-Air Sheath (Pranamaya Kosha). The fifth level, Pratyahara, quiets the sense organs through the Mind Sheath (Manomaya Kosha). The sixth level, Dharana or concentration, begins to control the mind through the Mind Sheath (Manas/Manomaya Kosha). The seventh level, Dhyana or meditation, works through the Intellect Sheath (Buddhi/Vijnanamaya Kosha). The last and eighth level, Samadhi or trance, is transcendence through the Bliss Sheath (Ahamkara, Chitta/Anandamaya Kosha). And finally, we will become aware of or realize our true Self, the Atman.(5)

This is how we combine Patanjali's Ashtanga Yoga and the Taittiriya Upanishad's five sheaths. Our goal is to guide our patients so they can expand their awareness through each level and find their own higher truths.

After this Shravana, we use Naikan meditation, a Japanese technique translated as "introspection," for Manana or contemplation on three Yamas: *ahimsa* (non-violence or harmlessness), *satya* (truthfulness), and *asteya* (non-stealing).

The method of the Naikan course is to intensively review our past actions and try to see very objectively what we have done and what others have given us, working with three themes:

- 1) what we received from others,
- 2) what we returned to others,

3) what troubles and difficulties we caused to others.

Each meditation session focuses on a specific three- to five-year period of our lives, and the sessions progress from our birth up to the present, or until the relationship ended.

The Naikan course begins with reflecting on our relationship with the closest person of our childhood (the mother, or primary caregiver). We assign the patients one of the Yamas, for example, *ahimsa*, or harmlessness, and a specific time period in their life to remember back to and focus on. The patients then have sixty to ninety minutes sitting in isolation to reflect and examine their past and try to discover instances where they have caused trouble for that person during those years of their lives. When the time is up, a counselor visits them and asks what they have found, making sure they have not gotten sidetracked. The patients receive the assignment for the next session, which is usually the same theme but focusing on the next few consecutive years, and begin contemplation again. They work on assignments like this from 6 a.m. to 9 p.m. for one week.

The reason Naikan begins with our mother is that the relationship between a child and mother is the basis for all personal relationships and personality building. If the patients have lost their mother, we can substitute someone else who cared for them in place of their mother, such as a grandmother or father.

After doing Naikan Meditation on our mother from birth up to the present or until the relationship ended, we will focus on our father, then our spouse (if we are married) or the people in our workplace, concentrating on the same three themes (what we received, what we returned, and the troubles and difficulties we caused). We continue these meditation sessions for one week from early morning until night.

Other Yama themes of truthfulness (*satya*) and non-stealing (*asteya*) are also used in Naikan to give us a chance to reconsider the faces that we have been presenting to others.

Results of Naikan Meditation at the Tottori University Hospital & Yonago Naikan Training Center

The following are the results of Naikan Meditations conducted by Professor Miki of the Clinical Psychology Department of Osaka University, showing how the character of patients changed after Naikan.(6)

<Method>

1) Target-- 128 people who came to the Naikan Training Center.

2) Tool -- The Yatabe-Guilford Personality Test (Y-G Test). This questionnaire offers 120 questions (e.g., "Are you impatient?"). Answers are selected from the choice of "Yes," "No," or " ? " This is a reliable personality test.

<Procedure>

On the morning of the second day of Naikan, Professor Miki gathered the patients, explained the study, and gave them the Y-G Test. They took the same test again by mail about two to six months after Naikan. Included in this research were the 128 people who took the tests both before and after Naikan.

<Results>

On the Y-G Test, there are classified the personalities into five types, A, B, C, D, and E. Each personality type is as shown in Table 1. The number of each type before Naikan is shown in purple, and after Naikan in blue.

As a result of Naikan, Type E, "Emotionally unstable, uncooperative, hides emotions, and prone to developing neuroses," decreased by one half. Type B, "Emotionally unstable, uncooperative, easily show emotion, and easily makes trouble for others," decreased by more than 60%. In contrast, Type A, "Average in every personality trait," doubled after Naikan. Type C, "Emotionally unstable, Calm and gentle cooperative, inactive," did not change. Type D, "Emotionally stable, cooperative, active and shows leadership qualities," increased dramatically.

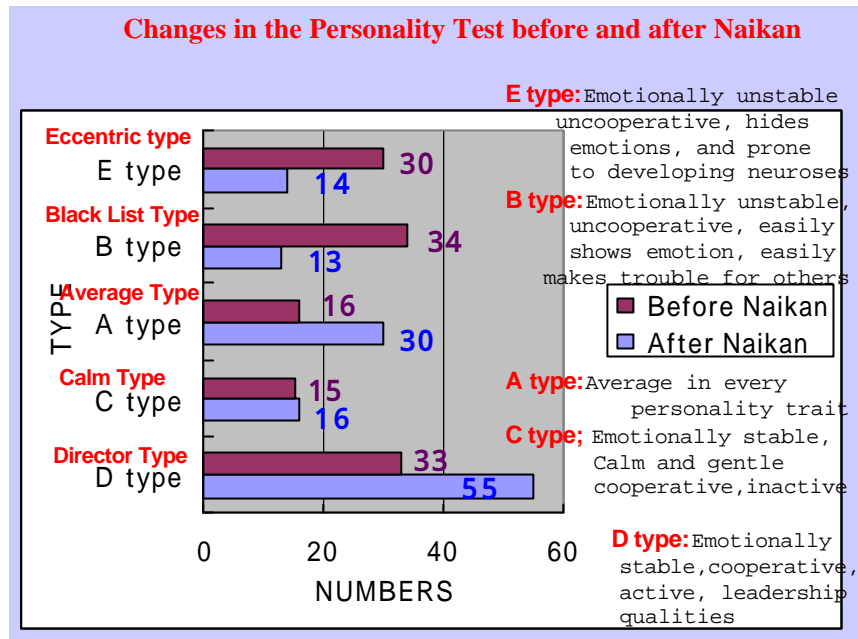


Table 1

Table 2 shows the character changes of one schoolgirl, 18 years old, who had a habit of stealing.

Changes in personality traits before and after Naikan

| Factor | Before Naikan | After Naikan | Difference |
|----------------------|-----------------|---------------|------------|
| Depression | 17 | 8 | -9 |
| Changes of mood | 17 | 5 | -12 |
| Inferiority | 15 | 6 | -9 |
| Sensitivity | 16 | 5 | -11 |
| Subjectivity | 14 | 7 | -7 |
| Non-cooperation | 16 | 6 | -10 |
| Offensiveness | 16 | 16 | 0 |
| Activeness | 8 | 8 | 0 |
| Easygoing | 14 | 18 | +4 |
| Thinking externality | 9 | 14 | +5 |
| Dominance | 6 | 15 | +9 |
| Social externality | 14 | 19 | +5 |
| Personality Type | Black List type | Director type | |

Table 2

To sum up these results, after Naikan, the subjects' emotions became stable, and

social adaptation increased. They became active, and their personalities changed in a socially preferred direction after Naikan.

Therefore, we can say that if psychosomatic patients practice Naikan, generally their character will become more positive: for example, human relationships will improve, and they will have healthier moods because they appreciate their true place in their world.

<Conclusion>

In this paper, we described the way we have integrated Patanjali's Ashtanga Yoga and the Pancha Koshas of the Taittiriya Upanishad as a therapeutic philosophy for treating stress-induced psychosomatic diseases that cannot be completely cured by modern medicine. Also in this paper, we showed how we use Naikan meditation based on the Yamas to build a more positive and healthy character, and bring unhealthy personalities into better balance.

Naikan is the beginning of our therapy in Japan, and the other seven steps of Ashtanga yoga such as Asana and Pranayama are added next so that patients can understand each level. We would like to leave these topics for another time, due to lack of space. We hope that by hearing our ideas for treatments of psychosomatic illnesses, others may find something useful here. Thank you very much.

References:

- 1 Sankara on The Yoga Sutras by Trevor Leggett
Motilal Banarasi Dass, INDIA
- 2 The prevalence of 'alexithymic' characteristics in psychosomatic patients.
Psychother Psychosom. 1973, USA.
- 3 KARMA YOGA
Swami Vivekananda Advaita Asharam Calcutta 2001
- 4 The principal UPANISHAD by S. RADHAKRISHNAN
London: George Allen & Unwin LTD 1974
- 5 YOGA Its basis and applications
Nagendra HR,
Vivekananda Kendra Yoga research Foundation
BANGALORE 1996
- 6 The Book about Encounter your Heart's Treasure
Nara Naika Training Center JAPAN 1998