Inside-Out or Outside-In: Understanding Spiritual Principles versus Depending on Techniques to Realize Improved Mindfulness/Mental Health

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ABSTRACT
We examine the relationship between understanding the spiritual principles of Universal Mind, Consciousness and Thought and perceived dependence on mindfulness techniques to realize improved mindfulness/mental health. Participants exposed to the intervention grounded in these principles also reported practicing meditation and/or mindfulness-based intervention techniques. The results support our prediction that as participant’s understanding of these spiritual principles increases, their perceived dependence on mindfulness techniques to realize mindfulness/mental health will decrease and as participant’s perceived dependence on mindfulness techniques decreases, their ability to maintain well-being during unpleasant mood states will increase.

Keywords: Mindfulness; Mindfulness-Based Interventions; The Three Principles; Mind, Consciousness and Thought; Innate Mental Health
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Numerous studies conclude that mindfulness is associated with improved mental health. More mindful people report less stress, anxiety, depression, anger and worry as well as more joy, inspiration, gratefulness, hopefulness, contentment, vitality and satisfaction with life (for a review, see Goldman & Calderon, 2012). Research also suggests that more mindful people have greater emotional awareness which may enable them to maintain well-being during unpleasant mood states (Cardaciotto, Herbert, Forman, Moitra, & Farrow, 2008).

Mindfulness-based interventions (MBIs) attempt to teach people attention-based and acceptance-based techniques thought to influence various change mechanisms which are suspected to mediate improved mindfulness/mental health. Several suspected change mechanisms (e.g., rumination, positive emotions, non-attachment) have received theoretical and empirical support (Creeson, 2009). However, following their review of mindfulness theory and research, Coffey, Hartman and Fredrickson (2010) stated, “…the possible mechanism(s) by which…mindfulness might impact mental health remain unclear (p. 236).

Recently, Pransky and Kelley (2014) offered a new explanation of the improved mindfulness/mental health related to successful MBIs grounded in a psycho-spiritual understanding commonly known as the Three Principles. The Three Principles explain that mindfulness/mental health is people’s most natural state of mind—a Divine gift that everyone can realize, access and sustain throughout life without practicing techniques—that everyone already is in a mentally healthy/naturally mindful state in every moment,
but for their thinking. According to the Three Principles, the source of improved mindfulness/mental health related to successful MBIs is natural, responsive mindful thought realized via a clear mind.

The Three Principles, evidence for their spiritual basis and the intervention grounded in them have been described in detail elsewhere (e.g., Kelley & J. Pransky, 2013; Kelley, J. Pransky, & Sedgeman, 2014; J. Pransky & Kelley, 2014). Here we briefly describe the Three Principles, offer a concise explanation of how they appear to interact to create people’s psychological lives and briefly describe the Three Principles intervention. Then we use the logic of this understanding to explain why MBIs, when successful, relate to improved mindfulness/mental health. Finally, we present a study that examines the relationship between understanding the Three Principles and perceived dependence on mindfulness techniques to realize improved mindfulness/mental health and the relationship between perceived dependence on mindfulness techniques and ability to maintain well-being during unpleasant mood states.

The Three Principles

In the early 1970’s, theosopher Sydney Banks (1998, 2001, 2005), experienced what mental health pioneer, Donald Klien (1988), described as a “spontaneous spiritual transformation” (p. 311) where Banks realized that everyone’s psychological experience is constructed by the use of three spiritual principles which he referred to as Universal Mind, consciousness and thought. Banks viewed Universal Mind (or Mind), consciousness and thought as an inseparable, interrelated trinity that provide a connection between the formless life force and the world of form. Banks saw Mind, consciousness and thought as fundamental truths that act on everyone psychologically, much the same
as gravity is a truth that impacts everyone physically. Banks asserted that Mind, consciousness and thought operate in everyone, every moment and affect all behavior (J. Pransky & McMillen, 2012).

After hearing of Banks’s ideas, two psychologists, Mills (1977, 1995) and G. Pransky (1998), sought him out and worked with him to turn what he had realized into a new paradigm for psychology (Mills, Blevens & G. Pransky, 1998). This understanding then evolved into what became known as Psychology of Mind (Kelley, 1993; G. Pransky, 1998), Neo-Cognitive Psychology (Kelley, 1990), Health Realization (Kelley, 2003; Mills, 1995; J. Pransky, 2003) and now is typically referred to as the Three Principles.

**The Principle of Mind**

Banks referred to Mind as the purest life force; the source or energy of life itself; the universal, creative intelligence within and behind life. Historically, Mind has been referred to in many ways such as Spirit, Absolute, Divine Ground, Universal Intelligence and God. This life energy is continually manifested in and flows through “personal mind;” the individual mind of every person. Banks saw Mind as the source of mindfulness/mental health always available to people through a clear mind. Banks (1998) stated:

“All humans have the inner ability to synchronize their personal mind with Impersonal Mind to bring harmony into their lives…Universal Mind and personal mind are not two minds thinking differently, but two ways of using the same mind” (p. 32).
The Principle of Consciousness

Banks saw consciousness as the Mind-powered agency that allows people to be aware or cognizant of the moment in a sensate or knowing way. Consciousness transforms thought into psychological experience through the physical senses. As people use the power of thought to construct mental images, these images “appear real” to them as they merge with consciousness and register as sensory experience. Consciousness uses thought to inform people’s senses, producing their moment-to-moment psychological experience from the “inside-out.” Consciousness also allows people to recognize that they are using the power of thought to construct their psychological lives from within and to survey life from a compassionate, impersonal and objective stance.

The Principle of Thought

Banks viewed thought as the creative agent, the capacity to give form to formless life energy—the mental imaging ability of people; the continuous creation of life experience via mental activity. Banks emphasized that thought, as a principle, refers to the ability to think and thereby to create psychological experience from within. Thought does not refer to what people think; the content or products of people’s thinking (e.g., their beliefs, feelings and perceptions). Rather, what is constant from person to person is the agency of thought or “that people think.”

To summarize, the Three Principles explain: (a) all people use the power of Thought to construct their psychological lives from within; (b) every experience that people create using thought is enlivened by consciousness and made to appear real to them; and (c) people’s behavior is perfectly alligned with how thought and consciousness make their lives “appear” to them. The only experience that people can have is their own
thinking coming into their consciousness and being experienced as real. Every person then thinks, feels and acts out of the way their lives look to them created by these spiritual principles.

**Natural Mindfulness/Mental Health**

The Three Principles explains that people have a natural state of mindfulness “built into” them as part of pure consciousness. Whenever the personal mind clears it aligns with Mind and realizes natural, responsive, mindful thought that produces the experience of mindfulness/mental health. Banks viewed mindfulness/mental health as people’s natural state of mind that surfaces spontaneously whenever the mind clears of the only thing obscuring this health in the first place; people’s *misuse of the power of thought*.

There are myriad ways that people misuse Thought to obscure innate mindfulness/mental health (e.g., worrying, ruminating, over-analyzing). However, this understanding explains that when less healthy thinking clears, what remains is pure consciousness/responsive, mindful thought. In other words, people stop experiencing mindfulness/mental health only when they obscure it with their own less healthy thinking. According to the Three Principles, people can realize mindfulness/mental health and as a lifestyle, *without practicing techniques*, because this is their natural state of mind that comes from Mind through consciousness uncontaminated by less healthy thinking.

Mustakova-Possardt (2002) stated:

Mental health is the innate capacity capacity of every person to return into alluignment with Mind from a clear mind, and manifest fresh understanding and creative responsiveness in the moment. Mental health is an innate, natural state of
well-being or wisdom arising from pure consciousness and accessed via a clear mind…In every moment, when individual mind is spontaneously or intentionally aligned with Mind and focused away from its intensely personal memory-based world, innate mental health bubbles up, and is characterized by a natural and effortless flow of thought…as the experience of peace, contentment, larger perspective on immediate reality, detachment and a general generous, loving and deeply moral view of life. (p.11)

**The Three Principles Intervention**

The Three Principles intervention has been used in several areas such as community revitalization (e.g., J. Pransky, 2011), trauma treatment (e.g., Halcon, Robertson & Monsen, 2010), building resilience (e.g., Kelley, J. Pransky & Sedgeman, 2014), school violence prevention (e.g., Kelley, Mills & Shuford, 2005), substance abuse treatment (e.g., Banerjee, Howard, Mansheim, & Beattie, 2007), correctional counseling (e.g., Kelley, 2011), anger management (e.g., Kelley & Lambert, 2012), mental health (e.g., J. Pransky & Kelley, 2014) and prevention (e.g., J. Pransky & McMillan, 2012).

This intervention attempts to help people realize and sustain their birthright of mindfulness/mental health by teaching them how people’s psychological experience is created from the “inside-out” by their use of the principles of Mind, consciousness and thought. The efficacy of the Three Principles intervention is realized when people, as a result of understanding the Three Principles, experience new insights regarding one or both of the following: (a) *thought recognition*—the realization that thought is the only “reality” people can ever know and that they have the ability to see this and be conscious of it in the moment; and (b) *innate mental health via a clear mind*—the realization that
everyone has all the mindfulness/mental health they need already inside of them and that when the mind clears from less healthy or unconstructive thinking, this natural mindfulness/mental health is realized.

**Mindfulness-Based Interventions**

Mindfulness-based interventions attempt to teach people various attention-based and acceptance-based techniques. Mindful attention-based techniques (e.g., honing attention on one’s breath) help people bring their attention into the present. Mindful acceptance-based techniques help people be open and receptive to their thoughts, feelings and sensations; to avoid judging them and giving them meaning (Kabat-Zinn, 2005). In sum, mindful attention and acceptance techniques, when successful, help people bring their attention into the present and allow their thoughts to flow freely through their minds.

The Three Principles explains that mindfulness/mental health is people’s most natural state of mind that surfaces spontaneously when the mind clears of the only thing keeping this health obscured in the first place; *less healthy thinking*. Thus, practicing mindfulness techniques is not necessary to realize improved mindfulness/mental health—*the sole requirement is a clear mind which automatically realizes natural mindfulness/mental health*. When people recognize this natural “mechanism” at work, the author’s posit: (a) they will be less inclined to depend on mindfulness techniques (or myriad others) to access and sustain improved mindfulness/mental health; and (b) as their dependence on mindfulness techniques decreases their ability to maintain well-being during unpleasant mood states will increase.

**The Present Study**
Hypotheses

The hypotheses for this study are as follows:

**Hypothesis #1**: Three Principles understanding will have a significant inverse relationship with mindfulness technique dependence (MTD).

**Hypothesis #2**: Insight regarding thought recognition, gained through Three Principles understanding, will have a significant inverse relationship with MTD.

**Hypothesis #3**: Insight regarding innate mental health via a clear mind, gained through Three Principles understanding, will have a significant inverse relationship with MTD.

**Hypothesis #4**: MTD will have a significant inverse relationship with ability to maintain well-being during unpleasant mood states.

Method

Participants

Prior to conducting this research, human subjects approval was secured from an institutional review board. Participants were obtained with assistance from organizations that teach the Three Principles intervention. These organizations sent electronic requests to their current and former students directing them to the survey site and requesting they complete the survey. It was made clear in the request that only individuals 18 or older could take the survey.

196 people completed the survey out of which 172 also reported practicing mindfulness meditation and/or MBI attention/acceptance techniques. Specifically, approximately 26% of these participants indicated practicing meditation and/or MBI techniques daily, 33% several times a week, 31% several times a month and the remaining 10% several times a year. These 172 participants were used in this study.
Variables

Gender, Race, Age, and Education. Gender was measured using a dichotomous variable (coded 0) if the participant was female or male (coded 1). Race was measured as Nonwhite = 0 and White = 1. Age was measured in continuous years. Education was measured using a dichotomous variable indicating if the participant had earned a graduate or professional degree (coded 1) or less education (coded 0).

Mindfulness Technique Dependence (MTD). The MTD was developed by the first author to measure participant’s perceived dependence on practicing mindfulness techniques to realize improved mindfulness/mental health. The MTD contains four items measured on a six-point Likert scale ranging from 1 (strongly disagree) to 6 (strongly agree). Sample items are: “Regular meditation and/or using MBI techniques is essential for high self-esteem and low stress” and “I can achieve and sustain mental health without practicing mindfulness meditation and/or using MBI techniques” (reverse coded). Item responses were summed to obtain a total MTD score. The internal consistency reliability coefficient (i.e., Cronbach’s alpha) was .95.

Three Principles Inventory (3PI) (Kelley, 2011). The 3PI contains 26 items which measure Three Principles understanding, insight regarding “thought recognition” and insight regarding “innate mental health via a clear mind.” Three Principles understanding (3PU) is measured using eleven 3PI items scored on a six-point Likert scale ranging from 1 (strongly disagree) to 6 (strongly agree). A sample item is: “When people have feelings such as well-being, gratitude and love they can always trust their thinking.” Item responses were summed to obtain a total 3PU score. The internal consistency reliability coefficient (i.e., Cronbach’s alpha) is .70.
Insight regarding Thought recognition (TR) is measured using eight 3PI items scored on a six-point Likert scale ranging from 1 (strongly disagree) to 6 (strongly agree). A sample item is: “My entire experience of life (my feelings, perceptions) is created by my thinking.” Item responses are summed to obtain a total TR score. The internal consistency reliability coefficient (i.e., Cronbach’s alpha) is .87.

Insight regarding Innate mental health via a clear mind (IH/CM) is measured using seven 3PI items answered using a six-point Likert scale ranging from 1 (strongly disagree) to 6 (strongly agree). A sample item is: “I am unlikely to experience wisdom unless my mind clears or quiets down.” Item responses are summed to obtain a total IH/CM score. The internal consistency reliability coefficient is .74.

Difficulties in Emotional Regulation Scale (DERS) (Gratz & Roemer, 2004). The DERS is a 36 item self-report questionnaire which assesses six aspects of emotional regulation and the ability to avoid emotional responses. We used the DERS-Acceptance component which contains five items measuring people’s ability to maintain well-being during unpleasant mood states. Items were measured on a five-point Likert scale ranging from 1 (almost never/0-10%) to 5 (almost always/91-100%). A sample item is: “When I’m upset, I become angry with myself for feeling that way (reverse coded).” Item responses were summed to obtain a total DERS-Acceptance score. The internal consistency reliability coefficient was .83.

Results

The typical respondent was a woman (63%) and was White (86%). The average age of those who completed the survey was about 50 and ranged from 23 to 82. Forty-six percent of the participants indicated that they had earned a graduate or professional
The descriptive statistics of the variables used in this study are presented in Table 1. There was sufficient variation in all the variables and all had an internal consistency reliability coefficient of .70 or higher. An exploratory Principal Axis factor analysis conducted for each index variable determined that all loaded on the predicted factor.

**** Insert Table 1 about here ****

Multivariate analyses using Ordinary Least Squares (OLS) regression were computed for the four dependent variables. For all the regression equations there appeared to be no problem with multicollinearity (i.e., a high shared variance/overlap among the predictor variables) based on the Variance Inflation Factor (VIF) scores and the Tolerance values. In addition, the issues of outliers, influential cases, normality, linearity and homoscedasticity of residuals and independence of errors in the regression analysis were tested (Berry, 1993; Tabachnick & Fidell, 1996).

The first regression equation was with 3PU as the dependent variable and gender, race, education and MTD as the predictor variables. The results are presented in Table 2. Based on the R-Squared value of .43, the predictor variables explained approximately 43% of the observed 3PU variable. Race and MTD had significant associations with 3PU. White participants in general reported higher levels of Three Principles understanding than Nonwhite participants. Increases in Three Principles understanding were associated with lower levels of mindfulness technique dependence.

For the second regression equation, the dependent variable was TR and the predictor variables were gender, race, age, educational level, and MTD. The predictor variables accounted for approximately 19% of the variance in the TR variable. Again, race and MTD were significant predictors. White participants on average reported higher
levels of thought recognition compared to their Nonwhite counterparts. Increases in insight regarding thought recognition were associated with decreases in mindfulness technique dependence.

For the third regression equation, the dependent variable was IH/CM, and the predictor variables were gender, race, age, educational level, and MTD. The predictor variables explained about 25% of the variance in the IH/CM variable. The only predictor variable to reach statistical significance was MTD which had an inverse association with IH/CM. In other words, increases in insight regarding innate mental health via a clear mind were associated with decreases in mindfulness technique dependence.

For the fourth regression equation the dependent variable was DERS-Acceptance and the predictor variables were gender, race, age, educational level and MTD. The predictor variables explained 11% of the variance in the DERS variable. The only predictor variable to reach statistical significance was mindfulness technique dependence which had an inverse association with ability to maintain well-being during unpleasant mood states.

**** Insert Table 2 about here ****

Discussion

The multivariate appeared to support each of our predictions. First, as participant’s understanding of the Three Principles increased their perceived dependence on mindfulness techniques to realize improved mindfulness/mental health decreased. Second, as participant’s insight regarding thought recognition gained through Three Principles understanding increased, their perceived dependence on mindfulness techniques to realize improved mindfulness/mental health decreased. Third, as
participant’s insight regarding innate mental health via a clear mind gained through Three Principles understanding increased, their perceived dependence on mindfulness techniques to realize improved mindfulness/mental health decreased. Fourth, as participant’s perceived dependence on mindfulness techniques decreased, their ability to maintain well-being during unpleasant mood states increased.

The Three Principles explains that meditation and/or MBI attention and acceptance techniques, when successful, help clear people’s minds which allows them to realize improved mindfulness/mental health. MBIs are one of many techniques (e.g., hypnosis, progressive relaxation, guided imagery, activities that induce flow) that can help clear people’s minds and allow them to realize improved mindfulness/mental health. However, techniques are unlikely to point people toward new insights regarding thought recognition and/or inner mental health via a clear mind that are gained through understanding the Three Principles. Absent these insights, our findings suggest that people will be more likely to depend on various techniques (legal and illegal) to realize improved mindfulness/mental health. Also, our findings suggest that, with these insights, people are better able to maintain well-being during unpleasant mood states because they recognize that these moods signal less healthy thinking that would be foolish to take seriously and entertain.

Study Limitations

As a single exploratory study with a convenience sample of people exposed to the Three Principles intervention, more studies are needed to determine if the results can be replicated. Since participants for this study were recruited by organizations that teach and promote the Three Principles intervention, the results may not apply to the general
population. Thus, future studies using these variables are needed to compare the responses of people exposed to the Three Principles intervention with people with no Three Principles exposure. Also, this study was cross-sectional which means causality cannot be empirically demonstrated.

**Conclusion**

Brown, Ryan and Creswell (2007) cautioned mindfulness researchers, “…we are reminded by the saying that more is not always better, and what often appears to be complex phenomena turns out to be, with deeper investigation, quite simple” (p. 277). The Three Principles explains that realizing and sustaining improved mindfulness/mental health does not have to be complex, multi-faceted or tied to particular techniques. Rather, this understanding explains that mindfulness/mental health is a Divine gift realized via a clear mind; *that everyone already is in a mentally healthy/naturally mindful state in every moment, but for their thinking.*

We are in no way saying that meditation or MBI techniques are a bad idea or shouldn’t be practiced. We recognize that these techniques have been helpful to many people and can facilitate deep levels of mental quietude. The Three Principles simply offers a different explanation of the source of improved mindfulness/mental health related to meditation and/or MBI techniques and explains why techniques are not necessary to access this health. An understanding of how mindfulness/mental health naturally emerges may be more practical for people to carry it into daily living. While more research is needed to test the logic of the Three Principles understanding and the efficacy of the Three Principles intervention, existing supportive empirical and anecdotal
evidence seems compelling and appears to warrant the attention of mindfulness, mental health and spiritual researchers and practitioners.
References


