Morita Therapy According to Morita: Dwelling in the Tension between Hardy and Fragile Life

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Cover Page Footnote
Zen garden in Morita’s therapeutic habitat in Kōchi (Shikōku Island, Japan). (Cover Photo by LeVine in 2015; uncut black & white version in LeVine, 2018, p. xxii)

This article is available in The International Journal of Ecopsychology (IJE): https://digitalcommons.humboldt.edu/ije/vol1/iss1/5
Morita Therapy According to Morita: 
Dwelling in the Tension between Hardy and Fragile Life

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Abstract

At the turn of the last century, Shōma Morita, MD (1874-1938), observed the ways thriving habitats revitalize and sustain humans, other mammals, birds, insects, fish, trees, fungi, and other life. Compatibly, Morita progressed his theory of peripheral consciousness (musho jūshin), which informed his therapeutic ecological habitat and methods. In Morita’s era, scholars and clinicians mulled over diverse hypotheses on consciousness and how consciousness theories (or lack of a theory) influence therapy and places of delivery. Largely by the 1980s, phenomenological inquiry was displaced (if not discredited) by advocates and funders of cognitive science. Therein, consciousness was reframed as awareness in humans and animals that depends on the species neurological substrates.

Keywords: Morita therapy, Zen, Shōma Morita, Shinkeishitsu, Neurasthenia
Overview to Shōma Morita, MD (1874-1938)

Shōma Morita, MD (1874-1938) designed his ecological-based therapy at the turn of the last century. While Morita trained as a physician, psychiatrist and psychotherapist, he was also a researcher, naturalist philosopher, bonsai artist, Zen practitioner, and human rights advocate in psychiatry. In Morita’s era, practitioners were invigorated by discussions on philosophy, naturalism, and the phenomenology of consciousness (Kora and Sato, 1958). Over the course of a decade, Morita tested the efficacy of his theories, sequential methods, and design of his therapeutic eco-habitat. He attended to the aesthetics and utility of indoor and outdoor therapeutic spaces, equally. As an historical note, Morita maintained a private practice in Tokyo with an essential garden during his university professorial career. He resettled permanently into his ancestral home on the mountainside in Kōchi prefecture on Shikoku Island. Morita practiced his sequenced therapy there until the end of his life. Among other delights, Kōchi offers visually dense constellations and ‘the silver river’ (Japanese reference to the milky way). Morita’s Zen garden allowed for indoor and outdoor viewing by clients and staff (see Cover Photo 1, LeVine 2015).

In keeping with Morita’s formulation of consciousness, clients are meant to reside in a restorative ecological habitat for all four progressive stages. In a nature-drenched setting, clients’ diurnal rhythms recalibrate naturally as they wake, rest, eat, and explore according to natural cycles of light-and-dark. Surrounding flora, fauna and balancing elements in Nature have therapeutic agency. Clients wake to a bird’s song or fall asleep to night’s tempo (wind, rain, moon shadows, frog songs). Each stage (averaging 5 days) holds power equal to the next stage for vitality: (1) the first stage is designed for rest with silence (no reading, writing, electronic devices or artificial light) in a room with natural light. The neuro-sensory system gradually settles as over-thinking, imagining, and emotional reacting settle; (2) the second stage includes fine-motor activity outdoors (plant and animal care and observations, and small art making); (3) the third stage engages gross motor activity and environmental work (moving stone, cutting branches); (4) the last stage brings spontaneous group play and humour; cooking becomes a sensory experience (Morita, 1998, LeVine, 2018). During this century’s pandemic and Earth’s climate crises, Morita offers wisdom on the aesthetics of simplicity and how to live according to our ecological reliance that is fragile and hardy, simultaneously.

Morita’s eco-centric practice was an antidote to global industrialization in the 19th and 20th centuries. International discourses prevailed, too, on how to live an eco ethical life. Scholars in Germany posited ideas on lastingness (Nachhaltigkeit) while other communities in the United Kingdom and Europe generated eco-sustainable village projects (du Pisani 2006).1 Meanwhile in Japan, such movement was well underway. In fact, the Edo Period (1603-1867) is considered to be Japan’s ecological-consciousness era when ideas and projects proliferated on how to live according to seasons and local resources. These views permeated the Meiji Period (1868-1912) in which Morita lived, despite the government’s reforms. Japan is 70% mountainous, thus geo-cultural cells are shaped naturally into small sustainable village entities to operate according to Shibori Kidokunashi (Ishikawa, 2000). This term posits that natural and supernatural phenomena are intertwined, which is consistent with Shintoism.2 In Morita’s mountainous and sea region of Japan, Shinto, Jōdo Shinshū Buddhists, and Zen consider phenomenal matters on time, space and sentence to be undifferentiated.3 On this point Morita wrote:

We have a song in Zen that goes as follows: I wonder if the bell itself tolls or the stick that rings the bell creates sound. No, the sound arises from the space between the bell and the stick…When the stick strokes the bell as an external event, the bell vibrates as an internal event, and an entirely new psychological phenomenon occurs (p. 11, 1928/1998).

Morita never travelled to Europe or North America, due likely to restrictions imposed by the government in the Meiji period. However, he explored European and Japanese

1 John Seymour (1914-2004) pioneered a movement to create homes for living inside nature with regional self-sufficiency, to live as though the world mattered (Seymour, 1991).
2 These are ethnographic (anthropological) terms whereby emic is to observe and ponder through one’s own cultural lens, and etic is to observe and ponder through the (cultural field) lens of the other.
3 In Shintoism, all life matter has the potential for sentence, which is in keeping with metaphysical and physical phenomena.
approaches to art, psychological medicine, human ethics, gardens, calligraphy, philosophy, and Zen. Unique to his practice, Morita created Zen calligraphies for contemplation. Calligraphy is formed in sweeping brushstrokes. Paradoxically, stillness and nothingness are expressed through movement. For Morita, “stillness lies not in a fixed state of mind” (LeVine, 2018, p. 40).

Morita maintained an interest in the phenomenology of consciousness throughout his life. As a contemporary of Sigmund Freud (1856-1939), Morita read Freud’s German texts and was intrigued by Freud’s linear construct of an unconscious or an unconsciousness (collective or otherwise) that resides inside the human mind. He was interested in Freud’s use of the supine position in psychoanalysis and how Freud’s methods (such as free association) reinforced a theory of repression. For Morita, if consciousness is rendered as a construct housed in the human or animal mind, then a nature over nurture worldview influences psychotherapy practice (the how, when, where of treatment). Akin to psychiatrist and human rights advocate Thomas Szasz (1920-2012), Morita dared to name the dysfunction in mental health institutions that decrease patient agency and increase institutional powers, such as the institutional use of shocking and inhumane treatments to cure ‘mental’ illness. Morita took a justice stance and removed his patients from psychiatric institutions after witnessing the trauma they were enduring; he assisted their recovery and vitality progressively in his eco-residential practice (Morita, 1928/1998).

In keeping with Morita’s consciousness perspective, Nature will be rendered with a capital ‘N’, which signifies life force that runs through all living matter—the glacial river and still pond—evenly. (A small ‘n’ denotes human nature or the nature of one’s character.) As a way of fostering the alliance between people and Nature, Morita sometimes gave a client a bonsai or a resident pet monkey for companionship. As stages progress, clients realize, experientially, how plants, people, animals (insects, fish) and all living matter require healthy, reciprocal habitats to thrive.

Nature as the Therapeutic Alliance

Morita designed his therapy to activate a client’s curiosity about the natural world around her/his. Does the cricket or grasshopper rub its wings to sing? Which eucalyptus leaves smell like lemon, and which leaves do koalas eat? These curious moments are when anxiety or preoccupation with the past dissipates. Clients begin to notice this pattern. Morita’s stages were designed to gradually shift the alliance from therapist and client to an alliance between client and Nature.

Consider the descriptive diary writing of a client at the end of stage two:

I was walking to see the little pear tree I planted yesterday. Then, that all alone feeling came and I thought about the day my partner left me. Why that week? It was the same week my dog died. I felt weepy. But suddenly, I heard wings flapping. A duck came right over my head. I watched it land on the pond. The glide was as long as the pond was long. That duck? Do all ducks land like this? The neck was shiny green. It dipped under water. I held my breath until it surfaced. Do ducks hold breath? It swam to the pond edge and tucked in head underwing. All grey. No green. Tree? I caught a glimpse of tree. I watered tree. Duck still tucks in.

In Morita’s time, psychology, consciousness studies, natural sciences, and philosophy were valued and explored. This was well before Cognitive Science Society (CSS) took hold in the late 1970s (Ellenberger, 1970). Meanwhile, proponents of ‘evidence-based consciousness’ guide inquiries away from heuristic and ethnographic research, and

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4 The Swiss psychiatrist, Carl Jung, challenged Freud’s depiction of the unconscious. Jung’s theory was that the “collective unconscious” was a phenomenon of the human mind, even though past human ancestry influences experience.


6 In many ways, his ecological perspective revises social-bound theories of attachment that favour human-to-human bonding.

7 Diary with permission (and with the omission of two personal lines): Classic Morita Therapy Centre, Victoria, Australia.

hermeneutic inquiry (dwelling in the meaning of texts, art, cultural practices, social phenomena and ways of explaining the unexplainable). This is not to discredit studies into the physiology of consciousness that focus on the energetic activity of the brain and ways it stimulates human awareness (Pepperell, 2018). However, Morita recognized how consciousness perspectives influence use of therapeutic place, space, time, methods, the therapist’s roles, and research inquiry. Morita stated that:

… the fear of death and disease is part of human nature … and fears associated with the four inevitable events in human life: suffering, aging, becoming ill and dying … therapy is not based on those principles that encourage momentary happiness or superficial pleasure … my therapy is different from Zen, which prescribes meditation. It is training by experiencing practical events” (1998, pp. 95-96).

On Suffering

Most intimately, Morita’s personal life influenced his philosophy on suffering. He created his theory of emotions whereby emotions run a natural course when one is engaged in (in sync with) the rhythm of the surrounds. Morita suffered greatly when his only sibling and brother, Tokuya, died at the start of the Russo-Japanese war in 1904. He felt his parents’ grief, too. His father died in 1923. Above all, his grief seemed unbearable when his only son, Shoichiro (born in 1911), died of tuberculosis in 1930. Morita and his wife, Hisai, were heart worn by the forever gone experience of their son’s death. Then in 1932, Morita’s revered mentor Dr Kure died. As if that wasn’t enough to bear, in 1935, Hisai suffered and died of a brain tumor. Shortly before his own death, his mother died in 1938. According to his lifelong attendant, Ms. Seto (1914-2012), Morita sat on his verandah endlessly, overlooking the Zen rock garden at the end of his life. (I had the invited privilege of having a full day to film conversations with Ms. Seto in Japan in 2012). Ms. Sato was Morita’s clinical administrator and housekeeper whom I filmed; she died just a few months after our conversations at the age of 98.9 Ms. Sato told me that it was Morita’s surroundings and his quiet kindness and ‘stillness’ that gave his patients a sense of belonging, which is a profound therapeutic outcome from the perspective of Morita therapy.

In Morita therapy, silence is not a devise used to deflect or ignore clients. Silence offers a presence that imparts life force. Morita therapy is as much about the ecological space, time and methods as it is the quality of the therapist’s presence. Therapists train to develop ‘presence’ when silent and active, which requires an embodiment of Nature. (This is likely the deepest loss to Morita’s authentic practice by those who truncate his therapy). Across the last decade of Morita’s life, the 1930s, Japan was under threat, politically and culturally, on many fronts. Surrealist artists, philosophers, and psychotherapist (outside psychoanalysts) were forced to work under the surveillance of the government. Morita and his successor Kora remained cautious in medical circles to withhold discussions on their eco-therapeutic practice. During that time, Morita’s allegorical attention to Zen in his writings protected him from public criticism. As this was a time when calligraphy was deemed a tradition, Morita began painting philosophical quotes in traditional calligraphy style on traditionally made paper. However, the meaning of his written message was another matter as Morita gave that a Zen flair.

Morita regarded emotions as facts that are discovered in relationships with the environment as much as with people:

…my experience with isolation-rest demonstrates that pain and suffering gradually subside if one endures them and let them follow a natural course. Ponder the old lesson from Tosa (the old name for Kochi Prefecture): ‘When one is angry and wishes to fight, think if over for three days before taking action. This lesson supports the fact that an intense emotion will disappear naturally over the course of three days” (1928/1998, p. 31).

Morita critiqued the theory of emotion posited by a contemporary, William James (1922).

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9 I offer my gratitude to Go Nonaka (film maker and musician).
James wrote of the expression of sadness from an inverse perspective where ‘we are sad because we cry.’ For Morita “… the emotion of sadness subsides with crying according to a natural course. I consider that the crying and the emotion of sadness are a single phenomenon” (1928/98, p. 32). In the first stage of Morita therapy, a client’s room is the space for feeling deeply without a judging mind and without any cognitive intervention to think differently about how one feels. An intervention targeted at reducing feelings actually disrupts the naturalness of emotions. According to Morita, “Emotion becomes stronger when a person expresses it beyond its natural course” and intensifies the spiralling of symptoms (1928/98, pp. 33-34).

Morita’s perspective on emotions is operationalized across additional stages to assist clients in developing emotional savvy in the face of any adversity. For Morita, anger is as nuanced as grief and as dimensional an emotion. Morita did not give a valence to anger; he did not consider it to be negative or positive. Anger does not need to be managed or dispelled by forgiveness; rather anger is a natural response that can alert us to betrayal or oppression or human rights violations. Anger is nuanced in nature. If we do not experience anger for what it is, we cannot know what to do next, responsively. Morita was not interested in silver lining theorists, such as turning anger into a creative force for art making or exercising. Rather, most existentially, Morita considered how anger and grief could increase suffering when emotion does not run a natural course and one’s imagination runs overtime. Suffering is suffering and there is no silver lining in this emotional fact. How we live when we are suffering is a question that speaks to humans throughout time and during this pandemic.

**Political Backdrop Behind Morita Therapy Development**

The political backdrop of the *Meiji Restoration* (1867-1868) sets the stage for the *Meiji Period* (1868-1912) in which Morita lived. At that time, organized religions were taboo and the government pressured psychiatrists to adopt western sciences; they were meant to look to Europe for their practices (a bit like reverse colonization). Pressures to reinterpret traditional Japanese thought into European discourse set the stage for scholars and artists during the Meiji era to cleverly skirt government punishment (Marra, 1999).10

By writing and publishing on the nature and treatment of anxiety, Morita sidestepped government pressures and furthered his specialization in *shinkeishitsu* (nervous syndrome for people with sensitive predispositions as described by Beard in 1869). He was most interested in *neurasthenia* and the exhaustion that centres in the nervous system (as defined in the current International Classification of Disorders – ICD). He distinguished neurasthenia from *shinkeishitsu* and was interested in how trauma episodes tax the nervous system. He began to test how complete rest in Nature could assist his clients’ recovery (Noll, 2011).11 12 Morita’s interest in the phenomenology of human existence propelled him to advance the development of his own therapy practice (Fujita, 1986, p. 83). As he advanced to Full Professor of Medicine at Jikei-kei Medical School in Tokyo, he capitalized on his status. He openly confronted his colleagues’ authorization of an *unconscious or unconsciousness* (communal, collective or otherwise) as a phenomenon that resides inside the human mind or body exclusively.

Morita left as Chair of Psychiatry in 1937 and advanced his protégé, Takehisa Kora (1899-1996), to assume that role, facilitating the training of the next generation of Morita therapists. Dr. Kora maintained his own private hospital and home practice with gardens, which furthered the role of nature in therapy.13 14 15 Unfortunately, after Dr. Kora’s death, 10 For an excellent description of this challenging period of history, see Michele Marra (1999), *Modern Japanese Aesthetics: A Reader*, University of Hawai‘i’s Press.
11 Research by Emil Kraepelin (1856-1926) influenced psychiatrists of the times. Kraepelin set psychiatry inside medical science and framed mental illness as having a genetic or physical cause. Morita challenged those views and maintained a contextual perspective on mental health erosion and enhancement.
12 Through observational case studies on neurasthenia, Morita treated patients’ fatigue that was related to thinking too much about what they felt or did; he attended to the awful past histories of trauma and abandonment and lack of nurturance by providing different experiences in a caring and natural environment.
13 Current evidence-based research on the relationship between nature, green space and wellbeing coincide with qualitative findings by Morita (Bronfenbrenner, 1979; Berman, Jonides, & Kaplan, 2008; Berto, 2005; Buils, 2007; Drenge, 1990).
14 Dr Morita passed his practice to Dr Kora. Dr Kora mentored Akihisa Kondo, MD (1911-1999) from the late 1940s until Kora’s death in 1996. Over the course of the last decade of Dr Kondo’s life, I was mentored generously until his...
his Morita therapy centre closed (his gardens, access to art making spaces and library).

In Japan today, Jikei-kei university hospital (directed by Kei Nakamura, MD) has maintained its Morita therapy wing in the hospital. The seclusion rest stage is honoured alongside the evolution of the other progressive stages, such as art making. Clients and staff maintain gardens and engage in animal care (rabbits, pigeons, dog); there is play between staff and clients, such as table tennis matches as well as preparing meals, which are times full of vigour. All in all, their setting honours Morita’s stages and his kindness as much as it can in a hospital environment.

**Morita Therapy According to Morita**

This section details the four-staged sequence of Morita therapy as Morita intended. It cannot be stated enough that each stage holds equal power. Morita was clear that his therapy begins with resting the body and mind before progressing to fine motor activity and finally gross motor activity. According to Morita:

> In principle, my method of therapy requires residential care … My treatment involves four stages: (1) isolation-rest therapy, (2) light occupational therapy, (3) heavy occupational therapy, and (4) complicated activity therapy in preparation for actual life (1928/1998, p. 35).

The therapist is trained in the art of silence and how to observe ‘what engages a client’s natural curiosity’ across all stages of therapy. In this classic setting, the client is in residence across the four stages, where each stage usually spans five days. The therapist’s decision to progress the client to the next stage is individually determined and based on reliable observational markers. For instance, a client may be progressed to stage three from stage two once she or he demonstrates spontaneous care for flora or fauna on the therapy premises. Action has meaning in Morita therapy. As a key example, there is a difference between a client who looks after chickens because it is assigned as a chore, and a client who spontaneously moves the chickens’ water trough into the shade because she notices the day is going to be hot and anticipates that heat will challenge the chickens. Morita therapy develops this kind of sensitive and natural responsiveness in clients. In this way, Morita therapy is not a ‘doing’ or activity therapy, as often misconceived by those who interpret outcomes from behavioural checklists. Responsiveness is about noticing, deeply, ‘otherness’ and responding therein.

**The first rest stage** is the paradoxical stage that primes therapeutic progression of the other stages. Initially, the client settles into the room designed for rest and minimal stimulation; natural light and garden aspects and nature sounds filter in the window. The resting room is chosen for light, shadows and aesthetic calm; the door into the room from a hallway is transparent (often frosted glass) so that movement outside the room is sensed.16 Rest of mind and body means the room is void of phone, music, computer, television, writing materials, books, smoking material, contact with family or friends, or instruction in meditation.17

As unnatural objects of stimulation are absent across the four stages, clients gradually turn their attention to that which is reliably accessible—sounds, sights, smells, textures of natural surroundings. The cicada’s song speaks of heat in the day; crickets speak of coolness. By day four of the rest stage, clients start to synchronize with morning bird sounds and the intensity of light that comes through the window just before breakfast.18

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15 Morita’s analyses coincide with contemporary views on the phenomenological mind as discussed in Gallagher & Zahavi (2008).

16 At the *Classic Therapy Morita Centre (CMC)* in Australia, the first stage averages 5-6 days and the successive three stages average 3-5 days; the average residential stay is 15-19 days.

17 After leaving Tokyo, Morita moved his practice to his ancestral countryside where a wide diversity of flora and fauna was experienced through the senses. A therapy site requires fresh air, resting rooms with windows for light and outdoor sounds, interactive gardens, flora, fauna, art-making space and social-engagement space that is centred on art and nature engagement. At CMC in Australia (while a consulting psychiatrist is on staff), we accept clients who are not on psychotropic medication and are not dependent on tobacco or alcohol. In keeping with respect for thriving ecological habitats, CMC is a 100% non-smoking environment.

18 Therapists in supervision at the *Classic Morita Centre* in Victoria, Australia, learn to observe and study clients’ orientation to space, time, other, self (across the rhythm of the day) without dialogue; these fine-tuned skills are...
For some clients who have endured cruelty, the experience of solitude is unfamiliar, particularly if their cortisol and adrenal systems have been activated and then exhausted by historical bouts of fear and dread. Above all, the client’s experience of moving through the evolution of the stages inside the therapy environment is the experiential change agent in Morita therapy.

Silence in the resting room is purposeful in Morita therapy. The first stage sets the paradoxical dynamics in motion. Over time clients realize that the buzz and pulse of the natural surroundings happen with or without human awareness. This author’s clients and professionals in supervision (who experience the therapy as part of their training) report that the resting seclusion room is a relational space where they begin to notice ‘other’ and feel oddly connected and free even without other people in their direct space. They are free to notice if they are not thinking or feeling in judgemental ways. Connection comes as they trust rhythms of day-to-night (without a therapist directing their awareness). They are comforted by the fact that the therapist and staff are nearby and accessible.

The silent first stage is most delicate with regard to the client’s feelings. They move between experiencing their own vulnerability and hardiness. Over time they observe/experience the hardiness and vulnerability of life that surrounds them. One client, for example, watched the way a bird tugged a worm out of the ground and how the bird was later taunted by a bigger bird and sought protection; she pondered in her diary, ‘which is more vulnerable or hardy than the other?’

Practitioner, psychiatrist and scholar of Morita therapy, Chihiro Fujita (1986, p. 25), speaks to the power of the first stage whereby “…subterfuges used to evade the self-confrontation were now unravelling. The resultant reaction was one of being left without protection, stripped naked.” Akihisa Kondo remarked often (during supervision) that the first stage is a time wandering period where clients’ imaginations are activated naturally to review past relationships, typically during the first three days. Gradually, by the fourth day, a client finally settles into the space and rhythms of the day rather than overthinking this and that. Throughout stage one, therapists are alert to their duty of care for client safety and alert to the emergence of past trauma and dissociation.

By day four in rest, clients generally become curious about ‘the nature’ of emotions. Through extended silence, they observe more finely how their own emotions have rhythmic patterns, like the ebb and flow of light change in a day. (Experiential knowledge of emotion cannot be compared to knowledge passed down to a client by a therapist who educates them intellectually about Morita’s theory of emotions.) During the rest stage, clients naturally stop evaluating emotions as positive or negative. They discover through experience that it is near impossible to be flat in mood when curious. Often a client sees emotion as the mystery when simply feeling feelings, without labeling them as this or that kind of anger or grief or joy. (See Appendix A for a case example.)

Across the stages, for those who have endured past cruelty, emotions are no longer memory triggers (LeVine, 2011). Stages one and two cannot be duplicated in time-

essential for reliable safety during the silent stages. Supervisors bring morning meals to clients in the first rest stage. Meals coincide with natural morning sounds and light. In summer, clients notice that breakfast comes shortly after the magnies sing out to each other; the attending therapist points out the interchange of birdcalls. In winter, breakfast comes later to match the same light. Those moments offer connection and curiosity meant to prime a return to natural diurnal rhythms without medication.

Morita’s considered interest in therapy and body positioning and movement-in-space is akin to his contemporaries, Moshé Feldenkrais (1904–1984), who devised his somatic method, and Frederick Alexander (1869-1955), who developed the Alexander Technique. Morita was also interested in Freud’s body positioning and the supine position of Morita therapy is not safeguarded in action-based and cognitive schemes of Morita-based counseling and psychotherapy (Ishiyama, 1990, 2008, 2013; Richards, Mullan, Ishiyama, & Nakamura, 2011; Sugg, Richards, & Frost, 2016).
framed therapy sessions, such as the 50-minute session, plain and simple.23

**In the second stage**, diary writings and sketches are descriptive nature studies, such as describing how an insect climbs a blade of grass or the trunk of a tree. Activity is guided to be slow at first so that they move evenly, stretch and feel their body out of doors (breeze on skin) following the rest stage. After leaving the resting room, they enter the outdoors as their refreshment period with fresh eyes, ears, noses, hands, arms, legs, and feet, neck, head and twisting torso alive (LeVine, 1993).

**In the second and third stages**, art-making media is individually chosen to enhance the experiences of a client’s inherent capacity or talent. Art making uses materials that lead to something practical, such as a wooden birdhouse for the garden, a quill pen for diary writing, a cup fashioned in clay for drinking tea. Such activities move clients into social dialogues with shared purpose. Clients do not talk about their adjustments, past history or reactions; rather, they speak descriptively of how porcelain clay feels more slippery than raku clay. Most essentially, they learn how to adapt to the medium rather than forcing the medium to adapt to them. For instance, one client noticed that a pet rabbit frequently knocked over her bowl, so he made a weighted square container from a clay slab and etched a rabbit image onto the bottom. The capacity to notice and respond is shaped while clients move from silence and inaction indoors to eco-engagement outdoors; in this way, they expand their sense of belonging in the world (Chang, 1974).

The fourth stage is the integration stage where play and humour increase alongside social engagement. This consolidation stage bridges the client’s return to her or his home place. It is a time for rehearsing, again, to live according to nature. The human body needs hydration, just like a cactus needs a rain drop of water or the tree needs a rain shower. Across the four stages, Morita created his eco-environment as a place to thrive for humans and for all the life that flies over, walks through, or dwells in the environ. By living in ecological enhancing surroundings for therapy, as therapy, clients gradually return to a balanced state at their own pace. All along, receiving natural light, fresh air, water, verdant soil, consistent kindness, healthful meals, and providing animal-plant care. Over time and according to Zen, the self is no longer the frame of reference. Pollinating bees and humans have the same need for non-toxic environments if they are to thrive. Herein lies the justice politics of Morita’s consciousness perspective:

….and I am not satisfied by theorists who put ‘consciousness’ into a fixed grid of categories. Rather, I try to observe and describe the phenomenon as it exists naturally, scientifically, and realistically … Changes occur in the human mind-body, night and day, regardless of whether a so-called consciousness or unconsciousness is recognized (Morita, 1928/1998, pp. 117-118).

It cannot be overstated that Morita’s guiding therapeutic principles and evolution of the stages are strongly grounded in mushojūshin, which is grounded in Nature. Morita designed his therapy to lead clients to experience the ordinary as extraordinary—as mysterious and ordinary as when ants surface to the top of the ground just before a rain.

**Cyclical Historical Interests in Morita Therapy**

Morita refined his therapeutic methods and milieus over several years through extensive case study. He applied as much rigour as his Euro-American contemporaries, including Wilfred Bion, Melanie Klein, Wilhelm Reich, Jean Charcot, Jacob Levy Moreno, Carl Rogers, Alfred Adler, and Sigmund Freud.

After Morita’s death, however, his therapy stayed within the borders of Japan. It was not until the early 1950s that interest was perked. In the mid-1940s until her death in 1952, psychoanalyst Karen Horney (1885-1952) organised soirees in her New York apartment; invited guests included Zen scholar, D.T. Suzuki, who had a Rockefeller Foundation grant while giving lectures in Zen at Columbia University. Amongst her other guests

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23 Brian Ogawa (2013) accounts for mind-quietness in his model of Morita counselling, which maintains the integrity of Morita’s core.
were Richard DeMartino, Akihisa Kondo, Abraham Maslow, Carl Sandburg, Paul Tillich, Erich Fromm, Harry Stack Sullivan, and psychoanalyst Norman Kelman. Kondo met Horney through Kelman while on his Fulbright Exchange Scholarship in 1950-1951 (LeVine, 2018). As a result of her Japanese connections, Horney made a trip to Japan in the summer of 1952, where she followed her interests in Zen. Through Kondo, she had discussions with Takehisa Kora (Morita’s protégé) in the summer of 1952, not long before her death (LeVine, 1994). On her return to New York from Japan, Horney delivered lectures about her ‘new’ analytic theory, which were gathered into a publication and later edited by Ingram (1987). DeMartino (1991) contributed an historical account in *The American Journal of Psychoanalysis* on “Karen Horney, Daisetz T. Suzuki, and Zen Buddhism”.  

Following a workshop on “Zen Buddhism and Psychoanalysis” that took place in 1957 in Mexico, *Zen Buddhism and Psychoanalysis* emerged (Fromm, Suzuki, and DeMartino, 1960). Jungian analyst, James Kirsch, attended that conference, and a reprint of his paper from *Psychologia* (1960) was shared in 2011 by Jungian analyst Thomas Kirsch—a half century later (Kirsch, T., 2014). Biographical notes are found in Dr Kondo’s publication in *The American Journal of Psychoanalysis* in 1991, titled “Recollections of Dr Horney,” where he scribes personal details of Karen Horney’s impressions. She told Kondo that she found purpose in the Zen garden where she sat during her late stage of cancer. (LeVine, 2018, p. 37).

Another significant and less known historical fact is that Fritz Perls, MD, founder of Gestalt therapy, entered Morita therapy in 1962 as an inpatient in Kyoto. While he referenced a Japanese experience in his 1969 biographical book, *In and Out of the Garbage Pail*, he never named Morita therapy. (This author located and obtained permission to publish archival case notes from Perl’s hospital files, which are found on pages 50-53, LeVine, 2018).

All went quiet on the Morita front outside Japan until the 1970s. Anthropologist David Reynolds produced the first ethnographic PhD study of Morita therapy in English in 1969, which was followed by his 1976 book titled *Morita Therapy*. After that ethnographic work, he went on to create his life-way, *Constructive Living* (1984), which is an amalgamation of Morita’s work stage and philosophical perspectives on ‘acceptance and gratefulness’ that are foundational to Naikan therapy. Respectfully, Reynolds did not apply Morita’s name to his ‘practical doing’ course of study (ToD Institute) where he designed his own metaphorical lessons from nature.

“The era of adaptation of Morita therapy hit its first peak in the 1980s and the early 1990s. Prior to this time, psychiatrists like Karen Horney and Erich Fromm were curious to know more about Morita and his theories and methods” (LeVine, 210, p. 57). David Reynolds responded to varied adjustments being made to Morita therapy to fit a North American culture that favoured cognitive sciences. “Western counselling psychology offers no such regular live-in training in Morita therapy to my knowledge … Morita therapy provides a new and radical perspective for rethinking the whole theory and practice of Western psychotherapy” (Reynolds, 1992, pp. 20-21). Since Reynolds's statement, research-clinicians at the University of Exeter operationalized some of Morita’s concepts and theories (such as *fumon*) and designed an outpatient program for “Morita Psychotherapy” that consists of 8-12 (one hour, face-to-face) weekly sessions.

24 For a more detailed history of this period and archival photos of Horney in Japan, see pages 36-43 in LeVine, 2018.
25 Author’s personal note: In 1998, Kondo travelled to Australia to supervise directly the first Morita therapy case study outside Japan. He assisted in the design of stage one and the resting room with natural morning light and glimpses of garden spaces through the window. Throughout my years of case supervision with Akishisa Kondo, he made reference frequently to Karen Horney.
26 The reader is directed to the first ethnographic study on Morita residential therapy by David Reynolds in 1969: “Directed behavior change: Japanese psychotherapy in a private mental hospital.” Doctoral Dissertation, University of California, Los Angeles. This was followed by Reynolds’s book on the topic in 1976.
27 Fumon is one of Morita’s experiential core methods; it is a stance taken by the therapist misunderstood by those untrained. The Japanese kanji can be rendered literally as ‘non-questioning’. Herein, the therapist assumes a warm yet aloof stance when a client wrestles with ridding self of symptoms. The ‘presence’ of the therapist becomes a container and calmness over time; this is a paradoxical method that assists the client’s experience of the rhythm of emotions that run a natural course as the client continues through the stages. This method requires supervision and training; the therapist embodies a silent-presence of kind. Fumon is often misinterpreted by untrained therapists as aloofness, which dynamically could leave a client feeling abandoned emotionally and psychically, particularly when someone is in a vulnerable state.
(Sugg, Richards, & Frost, 2016; Sugg, Richards, Frost, 2020). At this time in history, the preservation of Morita therapy as Morita intended is as fragile as the preservation of our habitats.

Notes on Zen and Morita Therapy

Akihisa Kondo rendered the kanji meaning of Morita’s term, mushojūshin (無所住心), as peripheral consciousness (Kondo and LeVine taped supervision session, Kondo Clinic, Tokyo, 1992). Peripheral consciousness is an ever-present life force. Humans can experience forces in and through Nature. Zen and religious studies scholar Christopher Ives translates the literal meaning of mushojūshin as “the mind dwelling in no place” (correspondence, 2015).  

Mercer (2016) captures Morita’s dynamic take on this phenomenological matter. “This kind of working synthesis becomes viable when Zen is de-theisised to become a phenomenological system of praxis…” (p. 30). When Morita wrote on consciousness, his inquiry was phenomenological and equally informed by Shintoism, Zen, naturalism and philosophical cosmology, whereby consciousness exists regardless of human existence or human awareness of such phenomena. In order to advance his phenomenal purview of consciousness, an ecological setting is vital to the therapeutic outcome. (See Appendix B for additional philosophical comparisons.)

Of all the psychoanalysts, Horney was intrigued by Morita’s ideas on authentic self. To grapple is to live according to human nature, with or without ever having conclusions. This is what most impressed Horney. At the end of her life, she came closer to Morita’s consciousness while sitting in a Zen garden in Japan in the summer of 1952—months before her death in New York. Overall, Morita devised a therapeutic method intended to expand the range of consciousness by casting off the self as the centre so that one can live inside the rhythms of Nature and human nature (LeVine and Ogawa, 2015; DeMartino, 1983, 1991; DeMoch, 2010).

Throughout the early 1900s, Japanese scholars took on the challenge of communicating the essence of Zen and consciousness to foreigners. Influential Kyoto philosophers in Morita’s era include Shin’ichi Hisamatsu (1889-1990), Keiji Nishitani (1900-1945), and Kitarō Nishida (1870-1945). Kondo noted the overlap in Morita’s ideas and these Zen specialists of the Kyoto school. While unable to conclude that Morita was aligned with one scholar-practitioner of Zen, during supervision Kondo concluded that Hisamatsu and Morita shared earthen pathways to ‘pure self. Like Nishida, Morita threaded Zen into his practice without elucidating if or how Zen leads someone to enlightenment (Kenshō). Nishitani’s well known quote serves as an illustration: From the pine tree, learn of the pine tree. And from the bamboo, learn of the bamboo. Nishida captures Morita’s same sentiment on unification. If we see our spirit as the unifying activity of reality, we must say that there is a unity to all things in reality, that there is spirit in it (Nishida, 1990, p. 75).

Notably, the Kyoto Zen School—Hisamatsu, Nishitani, and Nishida—endorsed Zen practice whereby pure phenomena flows out of pure experience (Nishitani, 1989, 1990). Most significantly, Morita developed his therapeutic ideas and methods that move clients into experiences that penetrate their whole being. It is only when clients give over to resting completely in stillness that they are set free from the torment of their own isolation in the connectedness of solitude. Some say this leads to an experience of consciousness that resembles Zen Awakening (LeVine, 2018). Largely, Nishida (1958)
and Morita situate human existence cosmologically as the constituting consciousness. Misdirected people tend to force themselves to fit into a certain categorical framework ... Rather, my methods concentrate on simple and routine work, such as carrying buckets of water and chopping wood, from which a person learns to respond to changes in the environment (Morita, 1928/1998, p. 96).

Concluding Remarks on Morita’s Thought

The more Morita refused to participate in the erosion of life force which he witnessed his clients enduring in the name of mental health, the more he furthered the formulation of his therapy. His design of therapy emerged from his theory of “peripheral consciousness” (mushojūshin) that necessitates an ecological habitat that influences indoor and outdoor engagement. As clients move through Morita’s therapeutic habitats sequentially, restoration and revitalization through Nature occurs. Morita empowered the ecological domain as a therapeutic agent. For Morita, human transformation is tied to the aesthetics of simplicity found in Nature, which may or may not be related to his engagement in Zen; but in keeping with Zen, that matter does not matter.

Morita offers wisdom on how to live in this time in global history when a pandemic collides with our world climate crisis. For Morita, suffering is suffering. And yet, paradoxically, it is the human fear of non-existence (not just death) that stirs at the core of human existence. For Morita, to digest this fear (to not exist) renders us as vulnerable as every other creature on Earth. And yet, if we over focus on this fear, we immobilize our creative potential and capacity to respond and live according to Nature. There is an art in learning how to keep the tension equal between the fear of non-existence and the desire for life. Morita therapy is designed to equalize this tension for clients. Too much fear is destabilizing and too much desire makes for foolhardiness. From the wisdom of Morita, in order to live according to human nature, we are to live ‘as if’ both fear and desire spring from the same force. Then, the ordinary is extraordinary.

During this pandemic, let us be moved to respond by fear for our own species. Simultaneously, let us hear habitats cry out to tell of the Indian Cheetah, Sumatran Rhino and Soft shell Yangtze Turtle that became extinct in 2019 and be moved to respond for their spirits and for life that still pulses. And while angst knocks at our door, experiences that re-kindle expressive wonder can be found in most any nook and cranny of the eco-scape that surrounds us. Consider a passage from a refugee client who will never escape or likely resolve an oppressive torturous past:

I heard a tiny peep in the corner of my room. Cricket stopped peeping just as I got close. Did cricket go still without thinking? I cupped it in my hand so it had space to breathe. I took it outside and put him under a bush. Gone so quickly. Cricket come back to teach me more about your peep.

Zen garden in Morita’s therapeutic habitat in Kōchi (Shikōku Island, Japan).

(Cover Photo by LeVine in 2015; uncut black & white version in LeVine, 2018, p. xxii)
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Appendix A: Case Example

Consider the following case of a client who has moved from stage one to two. A military veteran in his early 30s (whom we’ll call Samuel) came to Morita therapy (CMC) to recover from dread and related double binds. He said he knew the score after his first tour in Afghanistan. He reacted frequently when he recalled leaders using the term ‘collateral damage’ to sidestep the murder of civilians. Samuel’s distress was centred on the fact that he went on a second tour. “I am sleepless because I tricked myself. It is not about being tricked by someone else, it is about not respecting what I knew. Those body parts on the ground no longer speak.” Observations (room visits) were increased while attending to Samuel in the first rest stage; it was noticed that dusk was most unsettling for him, which he confirmed. The door to his room was opened enough so that a resident cat could visit. It was the anticipation of this visitation, additional visits by the therapist to refill his teapot with hot water and camomile flowers (when making safety observations), and refills of a hot water bottle that soothed him. When out of doors, the cat would find him in the garden and rub against him the way cats do; the therapist observed his gentleness with the cat and how he let the cat come to him on her own terms. In Morita therapy, therapists’ observations of their clients inform their therapeutic response. The therapist gave Samuel a stick and some tape and suggested he find feathers and other objects in the surrounds and make a toy for the cat. The client engaged wholeheartedly in this cat game and discovered that the cat preferred chasing objects that made crackling sounds. These are moments of delight that enhance vigour in clients.

39 Graeme Smith (2014) calls for complex case formulation with attention to individual uniqueness.
Appendix B: Morita and Philosophy

Morita’s therapy gives unbridged time and spaces for clients to grapple over fathomless existential questions posed often by philosophers. While agonizing, it is freeing, too, as this is human nature in motion. In Morita’s time, Japanese scholars favored European texts on philosophy, psychiatry and phenomenology over North American texts. For instance, Inoue cited Georg W.F. Hegel (1770-1831) as a bridge between Buddhism and Western thought and his text on the Phenomenology of Spirit (1807), which he originally titled, Science of the Experience of Consciousness 40 (Blocker and Starling, 2001, p. 133). While Morita put his phenomenological perspective into practice before Existential psychotherapy arose, he would have agreed with Irving Yalom (1980) on the nature of “pure anxiety” that coincides with living inside uncertainty. Akin to Morita, Yalom did not target this natural response for cognitive restructuring interventions. For Morita, however, humans live authentic lives when they live inside the tension between certainty and uncertainty. Relatedly, Morita commented on the essay by William James, Does Consciousness Exist? 41

William James (1890) divides philosophy into the soft-minded and hard-minded schools. If a client’s emotional base is ignored, any intellectual pursuit (by the therapist) only serves to increase the distance between the experiential mastery and therapeutic resolution (1928/1998, pp. 7-8).

Among Morita’s European contemporaries, the work of Henri Bergson (French philosopher and friend of William James) parallels his ideas more closely than those of Hegel or Heidegger. For Bergson, consciousness is a life force, which infuses all living matter. In Creative Evolution (1944; first published in 1907 as L’évolution Créatrice), Bergson’s philosophy of consciousness is found in Life and Consciousness: The Apparent Place of Man in Nature.

Life, that is to say consciousness launched into matter, fixed its attention either on its own movement or on the matter it was passing through; and it has thus been turned either in the direction of intuition or in that of intellect (Bergson, 1944, p. 199).

Morita sentiments coincide with existential psychotherapists Paul Tillich (1886-1965, German-born American), and Holocaust survivor Viktor Frankl (1905-1997). Tillich was impacted by his two-month excursion in Japan (Wood, 1961). In the monograph by Tomoaki Fukai (2013) titled Paul Tillich: Journey to Japan in 1960, Tillich’s inspiration by Buddhist scholars and practitioners is reviewed. Overall, Morita, Tillich and Frankl advanced a sophisticated discourse on consciousness while holding philosophy and science as complementary.

Grappling is also about pondering and agonizing over the human condition and injustice. Morita’s justice perspective and political independence resemble the persuasions of French, N. African psychiatrist and political philosopher Frantz Omar Fanon (1925-1961), who authored The Wretched of the Earth (1961). Fanon pointed to ways nationalist and bourgeoisie values primed a “national consciousness” and “collective ancestral oppression” and how “The living expression of the nation is the moving consciousness of the whole of the people” (Fanon, p 165). Morita’s Meiji period was steeped in oppression of a different cultural sort, but oppression and isolationism all the same. Similarly, human oppression is addressed by Theodore Roszak (1933-2011) and associated Eco-Buddhist discourse on the spectrum of consciousness 42 (Roszak, 1975, 1992). In The Voice of the Earth: An Exploration of Ecopsychology, Roszak (1992) contends that an ecological approach to therapy is vital for remedying the alienation between people and their natural environment (Coope, 2010; Conesa-Sevilla, 2019). Such alienation involves the politics of oppression, too, whereby humans oppress humans and humans oppress the rights of living matter to flourish, which may require a phenomenological conception of consciousness to realize this breadth of oppression and

40 Hegel considered “vitalism” more seriously than other philosophers of his time, which resonates with Morita’s perspective.
41 Does Consciousness Exist? was published by William James in the Journal of Philosophy, Psychology and Scientific Methods on 1 September, 1904 and republished posthumously in 1912 as Essays in Radical Empiricism.
42 Roszak’s spectrum of consciousness is often attributed mistakenly to Ken Wilbur.
our ethical role to respond.

Among the discussants on consciousness in Morita’s time is a British-born Canadian psychiatrist rarely referenced—Richard Maurice Bucke (1837-1902). Bucke (1991) scribed Cosmic Consciousness: A Study in the Evolution of the Human Mind in 1901.43 William James, whom we know Morita read, was interested in the way Bucke translated his own personal mystical experiences into theory. James quoted Bucke in his chapter on “Mysticism” in The Varieties of Religious Experience:

The prime characteristic of cosmic consciousness is a consciousness of the cosmos, that is, of the life and order of the universe… which alone would place the individual on a new plane of existence (Bucke, cited by James, 1985, p. 398).

Bucke recognized animal consciousnesses and advanced the term cosmic consciousness wherein the universe is living matter. Bucke’s formulation of consciousness extending cosmically was as unprecedented as Morita’s consciousness extending peripherally.

Chihiro, Fujita, MD discusses human nature in Morita Therapy: A Psychotherapeutic System for Neurosis:

The concept of nature (shizen) is integrated in the Japanese sense of life. It has the same meaning in Morita therapy, in the sense of a ‘return to nature’ (shizen ni kaere) … This, again, is the condition that Morita calls arugamama, the condition of casting off the artificial ego and returning to authentic human nature (Fujita, 1986, pp. 50-51).

Morita advanced a phenomenal connexion between existentialism, Zen, and Nature. Morita therapy allows for “accidental wisdom” according to Calhoun (2004). For Morita, therapeutic experiences of serendipity increase as clients move through the stages. Morita’s therapy is rightfully complex; his methods respond to the depth of questions about life that were commonplace amongst his contemporary consciousness explorers, such as William James (1842-1910) and Karl Jaspers (1883-1969). It is in our nature as humans to ask questions about existence. Is transformation related to consciousness? How far and wide and deep does consciousness range? Is consciousness a manifestation of the human spirit, soul? Is the cosmos infinite? Is consciousness the manifestation of all of life? (LeVine, 2018)44 Morita therapy is designed to give clients time to grapple and to realize the bitter sweetness of the freedom to not know.

43 Given James’ review of Bucke in Varieties of Religious Experience (1985, originally published in 1901) and how Morita read and referenced James, it is possible Morita came in contact with Bucke’s theory, too, but I could find no confirmation of this.
44 In Morita’s time, scholars debated the span of consciousness in medicine, science and philosophy. Those who caught Morita’s eye were Franz Anton Mesmer (1734-1815), Marquis de Puységur (1751-1825), James Braid (1795-1860), Jean-Martin Charcot (1825-1893), Silas Weir Mitchell (1829-1914), Otto Binswanger (1852-1929), Sigmund Freud (1856-1939), Pierre Janet (1859-1947), William James (1842-1910), and Karl Jaspers (1883-1969).