



## Four Quadrant Theory for Optimum Emotional and Physical Health

**Guest: Ken Wilber**

**Niki Gratrix** Hello, everyone! This is your host, Niki Gratrix! Welcome.

This summit is ideal for anyone interested in health who wants to learn from some of the great thought leaders of our time about how to approach medicine and health in a truly holistic way, one which doesn't just take into account multiple traditions and perspectives and modalities, but also explains how they all fit together into an approach, which is likely to be more successful, an approach we call integral medicine, which brings me to my first guest.

It is my distinguished honor and grand privilege today of introducing one of the great minds of our times to discuss all this and kick off the summit. It's Ken Wilber. According to Dr. Jack Crittenden, author of *Beyond Individualism, the twenty-first century literally has three choices: Aristotle, Nietzsche, or Ken Wilber*.

If you haven't already heard of him, Ken Wilber is one of the most important philosophers in the world today. He's the most widely translated academic writer in America, with 25 books translated into some 30 foreign languages.

Dr. Roger Walsh, a well-known professor of psychiatry, philosophy, and anthropology at UCI's College of Medicine, believes "Ken Wilber is one of the greatest philosophers of this century and arguably the greatest theoretical psychologist of all time."

Ken is the originator of arguably the first truly comprehensive or integrative philosophy, aptly named integral theory, which incorporates cultural studies, anthropology, systems theory, developmental psychology, biology, and spirituality, and has been applied in fields as diverse as ecology, sustainability, psychotherapy and psychiatry, education, business, medicine, politics, sports, and art.

His work has been quoted by people like Bill Clinton. Fans of his include Deepak Chopra, who calls him the Einstein of consciousness. Tony Robbins refers to him as a genius. And Marianne Williamson says "His work is fundamental. Who among us can really take a serious role in our individual and collective evolution who are not familiar with his work?"

So, Ken, a very, very warm welcome to the summit! We're honored to have you. And thank you very much for sharing your time with us today!

**Ken Wilber** Oh, well, Niki, thank you so much. This is an incredibly important topic. There are so many schools of medicine today. And what that tends to indicate to me is that there's this broad differentiation going on where we realize that there are all of these important schools. That why they're there.

There are men and women devoting themselves to those different schools. And I just don't believe the human brain would devote its entire life to something that's 100 percent wrong. I just don't think it's made to do something like that. So there's some degree of truth in all of these.

So what we're looking for is a way to not just throw them all in a grab bag and have an eclectic cafeteria model. We want to include them. But we also want to have a framework to show us how they all fit together. And so that's what we call the integral framework. And it's sometimes called integral pluralism because it is pluralistic. But the pluralism is not just a relativism. It's tied together in an integral framework.

And so medicine is one of the clearly most important areas for this to happen. It's in some accounts, it's in such a mess on the one hand. But clearly, we're moving to areas of enormous breakthrough. And it's a very exciting time to be involved in the field, particularly as these new more comprehensive integrative models start to come to the floor. So it's a very exciting period.

And I'm delighted to be here and participate in this summit, which is looking really at just one area of a more comprehensive medicine, but as an example of how this can be done. So I'm honored. And it's my pleasure and delight to be here with all of you.

**Niki Gratrix** And I think a good place to start would be an explanation of the 4 Quadrant element of Integral theory. And just as a background for the audience in terms of my link to your work and also how we've been dealing with chronic fatigue syndrome, specifically applying integral theory, just briefly myself and my ex-business partner Alex Howard, we set up a very successful clinic in London specializing in chronic fatigue back in 2004. We built it based on integral model.

By 2009, we had many thousands of patients in 35 different countries, won the award for outstanding clinical practice in the U.K. The clinic went on to get a pilot study published in the *British Medical Journal* in 2012, and is now completing a formal randomized controlled trial at the University of Surrey in the U.K.

So we know this applies and can be applied very well for chronic fatigue syndrome is a chronic complex illness. Like any other illness, it's a chronic complex illness. So this is an example that can be applied across the board. So please introduce us to the 4 Quadrant model and also how you came up with it?

**Ken Wilber** Yes. Certainly. Basically, the 4 quadrants are part of what we call the integral approach, and is sometimes technically called AQAL, which is short for all quadrants, all levels, all lines, all states, all types. Now there's no need to worry about those technical terms. We'll introduce and clearly explain anything we need as we go along. But we could start with the origin of the integral meta-model itself, which in our line anyway is fairly simple.

If you look at the various cultures around the world—East and West, North and South, pre-modern, modern, and postmodern—you see that each culture has created maps or frameworks through which they view the human condition. The action is then simple. We use all of these fundamental maps to create a composite map and inclusive map using all the maps to fill in the gaps in any of the others. The result is a truly comprehensive and fairly all-inclusive meta-map or integral meta-model.

Now the typical postmodern approach to this multiplicity of maps is simply to say that all truths are socially constructed and truth of the cultures that produce them, but don't have any universal or global validity.

But recently there's a newer approach to these many truths. And that is to look for meta-maps or meta-models that actually include many, even most of these various truths in a larger picture giving us a much bigger, wider, broader, more inclusive, more comprehensive view of the human condition. In other words, meta-maps that include the best and brightest of cultures East and West and from pre-modern, modern, and postmodern sources.

Of course, it's a truism that the map is not the territory. And we don't want to forget that. But at the same time, you don't want to have a map that's totally screwed up, either. And as we've created more of these integral or comprehensive meta-maps, our typical or conventional maps used in various disciplines start to look very partial, very limited, very fractured.

And, in fact, what we have found is that if we take this integral meta-map and apply it to today's major disciplines, we actually get much more inclusive, more coherent, more truly holistic and comprehensive versions of these disciplines.

And, in fact, in peer-reviewed journals devoted to this issue, this major Integral Meta-Map has been applied to almost 60 different disciplines, including medicine, law, history, education, therapy. And in each case, the result is more satisfying, inclusive, comprehensive approach to that discipline.

This has caused a lot of interest and enthusiasm for this MetaModel. And that's the model we're going to use here to see if we can make a little more sense out of this sprawling and complex thing called medicine. Because the first thing you notice about medicine today is that, like many disciplines, there are a large number of different and competing views about the correct way to practice medicine—orthodox medicine, alternative and complementary medicine, energy medicine, psychosomatic medicine, medicine introducing spiritual practices like mindfulness, cultural medicine, environmental medicine, multicultural medicine, and on and on.

So the idea was that, if this new Integral Meta-Map, with its capacity for greater inclusiveness and comprehensiveness, if it really did work, then would it help to introduce some genuine holistic unity to all these various practices of medicine, finding a way that each of them was true but partial, and gathering them all together into a larger, more embracing, more effective, overall medicine. And we think the answer to that question is "Yes." So that's what we're here to discuss in this particular dialogue. And then with succeeding presentations, we'll see if this larger synthesis does, indeed, hold up.

So the basic point is simply that by producing a more comprehensive view of the overall human condition, we gain a larger picture of the many things that can go wrong with it, as well as the many treatments that can be brought to bear on those dysfunctions. And this means we will be including all the essentials of modern orthodox medicine. But due to the more comprehensive nature of this Meta-Model, we'll also be including many other approaches that normally get little or no attention at all. The result—often called

integral medicine—goes beyond even present-day integrated medicine, simply because it touches on even more bases.

So that's what we'll be looking at and how you can use this more holistic model to make your healthcare, either as a provider or a recipient more effective and more comprehensive.

So you mentioned quadrants. Quadrants are one of the basic elements in the Integral or AQAL Meta-Map. They simply refer to the inside and the outside of the individual and the group or the collective. Putting these together gives us 4 major perspectives or dimensions of the human being, indeed of all beings, but certainly also human beings. And those are the quadrants—the inside and the outside of the individual and the collective.

Now, these sound pretty simplistic. But each of those actually has very practical examples. And we'll see they cover an enormous amount of territory. Each of those dimensions or quadrants can have healthy or unhealthy forms. And therefore, each of them produces a distinctly different type of medical theory and practice. And the integral view is that all 4 of those quadrants are equally real, equally important, and equally to be included in any truly comprehensive approach.

So we'll run through those 4 dimensions very quickly to give an idea of what's involved.



The Upper-Right quadrant—and, by the way, it's called "Upper Right" simply because when we draw all 4 quadrants on a piece of paper, this quadrant just happens to be in the UpperRight. So this is the outside, exterior, objective, physical view of the individual. That is, the individual organism looked at from the outside, in an objective, detached, even scientific fashion. For scientific materialism, this is the only real quadrant or real dimension. All of reality is made of individual, material, objective entities, and often just the lowest of those like quarks or atoms.

But this objective, individual view is the standard home of today's orthodox medicine, as well. So the organism looked at from this view has things like 1 physical heart, 2 lungs, 207 bones, a triune brain. And in the brain and nervous system you find neurotransmitters like dopamine, serotonin, acetylcholine, and so on. From this viewpoint every major illness has its predominant cause here, in the Upper Right or the objective individual view. And it therefore also has its cure or treatment in this quadrant.

So standard treatments are all physical or material items—drugs and medicines, X-rays, and PET scans, and MRIs, physical surgery, chemotherapy and radiation, sometimes diet and exercise, and so on. So, for this quadrant—and that of orthodox medicine—the causes of illness are basically physical. And treatment methods are basically physical, the overall view of scientific materialism.

This is a very real dimension. And its physical causes and treatments are certainly included in the medicine bag of the integral physician. The only question, of course, is whether this dimension is really the only real dimension in the universe and whether there are other dimensions equally as real and just as necessary to include in any comprehensive medical approach. But indeed, part of the excitement in integral medicine comes from some of the new and extraordinary breakthroughs that orthodox science and medicine are discovering in this physical dimension of the human being.

Neuroplasticity in the brain's structure, incredible advances in early nanotechnology, such as almost fully functioning synthetic retinas giving sight to the blind and inner ear elements for hearing, new discoveries in digestive and gut functioning, fresh insights into mitochondrial functioning and dysfunctioning, the role of the limbic system in common illnesses, spectacular new discoveries in the genome and its activity in health and illness, entirely new physical treatments for cancer, and so on.

One of the newly being investigated and one of the newly areas being investigated and causing a great deal of interest and excitement is the field generally called energy medicine. Here is where a more expansive and inclusive map of the human being is definitely needed even if you're looking just at the upper right because if you look at many of the cultures during pre-modern times, most of them had maps that included a whole spectrum of subtle energies. That is real energy, but operating in higher more subtle dimensions than the present day 4 gross dimensions recognized by physics, which are strong and weak nuclear, electromagnetic, and gravitational.

These subtler energies are often referred to as bioenergy, prana, ki, chi, kundalini, shakti, and various other mostly foreign items reflecting the fact that most modern Western science has concluded that these energies don't exist. They are, for the West, forgotten truths. And they do seem to be truths because a good deal of more recent scientific research in the West from people like Tiller and Motoyama has indicated that these ancient sages might indeed have been right, and that there are indeed forms of energy other than merely gross physical energy, specifically those energy fields associated with living beings and especially those beings with activated spirituality, in traditions such as Vedanta and Tibetan Buddhism and Neoplatonism, there is a whole spectrum of these energies said to range from gross physical to living subtle to spiritual causal energies, a whole spectrum of energy ranging from the densest to the most subtle or as many traditions put it, from the densest material to the most spiritual.

But these energies, like any, can be operating in either constructive and healthy or dysfunctional and unhealthy ways. And that means that a medicine that explicitly addresses these energies will have many advantages in dealing with those cases. An integral metamodel would definitely include these energies in the physician's kit and would be included by anybody looking for a more comprehensive healthcare and wellbeing.

Dr. Klinghardt will specifically discuss these energies and healthcare. He divides these energies into the traditional 5 major levels—physical, living energetic, mental, intuitive, and unity. These are talked about as 5 bodies. And that's exactly what the upper-right quadrant is: real, objective bodies made of real energy and matter, yet getting subtler and subtler and subtler as they get both more complex and more conscious.

This is behind, for example, the Buddhist notion of the Trikaya, which literally means the 3 bodies of Buddha—a gross physical body, a subtle illuminative body, and an infinite spiritual body, each with a corresponding mental or consciousness state. And those 3 bodies are often subdivided into 5 or even 7 bodies. The point being there's an entire spectrum of energy matching a full spectrum of consciousness.

Now, consciousness is particularly the inside or subjective realm of the individual—the upper left, not the upper right. So we'll get to that when we discuss the interior of the individual or the upper-left.

Well, which we might as well do now. If you look at an individual being, not from the outside in an objective detached stance, but from the inside in a subjective introspective sense, you will see not a triune brain or dopamine or serotonin or 2 kidneys, but images, feelings, thoughts, impulses, emotions, insights, and so on. This is the interior or inside of the individual. Or what we call the upper-left quadrant.

The upper-right objective quadrant contains the brain. The upper-left subjective quadrant contains the mind. According to scientific materialism—and those who believe only in the upper-right objective physical dimension—the mind doesn't exist or is at best a so-called “epiphenomenon” or by-product of the brain, not a reality in itself. Of course, there are idealistic philosophies that believe exactly the opposite. The mind is the ultimate reality. And the brain is just a conceptual construction and interpretation based on experience.

But both of these are examples of what we call quadrant absolutism, which takes just one of the 4 quadrants and claims that it and it alone, is real. We'll see there are philosophies that do the identical thing with each of the lower or collective quadrants, too.

But one of the ways that integral gets to be so comprehensive is by including each and every quadrant, not choosing just one and denying the rest. The quadrants arise together, exist together, mutually influence each other, and evolve together. None of them exist on their own.

The fact that both mind and brain are equally real is why the so-called “mind/body” or “mind/brain” problem won't go away. It won't go away because neither of those quadrants will go away. They are mutually arising, mutually existing, and mutually influencing. And both of them get sick in entirely different ways. So a different medicine

emerges from each of these quadrants. And that's important. Each of these 4 quadrants has a different type of medicine. And we need to include all of them.

Mind is just not the only item on the inside of an individual. There are also emotions and feelings, intuitions, spirituality, and altered states of consciousness, among others. And now the inside means, of course, looking at it subjectively.

If you cut the human body open and look at its organs, that's actually an exterior view. You're looking at those organs from the outside. You're looking at them from the upper right. And that's why heart, liver, kidneys, lungs, and so on are put in the upper-right quadrant. But if you feel them, if you have sensations, if you know them from within, from the inside, that's the upper left. And so that's the difference between these two.

And, of course, there are different schools that take each of those to be the only real realities. But we, of course, see them as correlative aspects of the same underlying whole reality. We see all 4 quadrants that way.

So all of these can malfunction or become unhealthy. And any truly inclusive medical or healthcare system will take them into account. And that's including things like altered states of consciousness. So we'll come back to many of these when we discuss levels, lines, states, and types, which is some of the actual contents of each of the quadrants.

For now, we simply want to acknowledge the existence of this dimension of our being and note that it can arise in unhealthy, as well as healthy ways. And so a truly integral medicine wants to address this dimension in its own terms, and not as being merely a derivative of the really real material body of the upper right.

We should also mention that there has recently been a considerable amount of interest in meditation systems, such as mindfulness. And their use in treating various illnesses, as well as managing pain states. This is another forgotten truth. This is another forgotten truth of pre-modern maps that we definitely want to recover and include. And we'll come back to this topic in just a moment.

Of course, an individual really doesn't exist apart from various groups and collectives of which it is a member. And these groups, like their individual members, can be looked at from the outside or from the inside. Looked at from the outside in an objective or even scientific stance, and you get things like systems theory and the belief in Gaia or the Great Web of Life, the idea that all individual beings are actually interwoven strands in a huge system of other interconnected individuals.

This whole is definitely greater than the sum of its parts. And many people believe that this whole alone is real. For integral, of course, this whole is definitely real. But it's still only one-fourth of the story, so to speak.

But this objective holistic system includes environmental, economic, legal, political, and technological networks, which weave together millions and millions of individuals at all levels of existence. A human being is a member of any number of these networks, stretching from the family to relationships to national membership to the global ecological system to the universal web of life. And again, virtually any of these many systems can become diseased.

And as these diseases manifest in individuals, they definitely become part of something that a truly Integral medicine is interested in.

Like individuals, groups or collectives can be looked at from within, and not just from without, from the inside as a member of the group, and not just from the outside as an observer of the group. When you do that, you find shared values and ethics and morals, different worldviews, mutual understanding, and a sense of membership, meanings and values among others.

The sum total of these shared interiors is your culture and, of course, you can belong to any number of subcultures, as well. When your culture judges that you are sick, it often has a very negative connotation. Sometimes even a moral condemnation. Remember when AIDS first showed up and how many fundamentalists took it as appropriate judgment from God. This negative cultural judgment can have a profound impact on the nature, cause, course, and cure of virtually any illness.

On the other hand, a healing and supportive culture can be incredibly beneficial. One study shows that women with breast cancer who join a support group live an extraordinary 100% longer than those who don't. This is the power of the lower-left quadrant, of our shared interiors, our cultural dimension. It's certainly something that an integral medicine would want to take into account.

So that's a very brief survey of the quadrants. The point, of course, is that all of them are important. All of them exist. And all of them can contribute to health or illness. Therefore, a truly inclusive, comprehensive, and effective healthcare would include all of them.

As it is right now, with orthodox medicine believing only in the upper-right quadrant—or the individual looked at in an objective and material fashion—then any illness actually originating in a different quadrant will be misdiagnosed and mistreated. No wonder some studies show that up to 70% of the problems that a client brings to the average doctor's office are not helped by what the doctor does.

What do we expect when the doctor is only treating one-fourth or 25% of our real dimensions? Of course, the other three-fourths are missed. When that happens, the doctor is almost certainly dealing with an illness that originated in a different quadrant and can only be effectively handled by addressing the correct quadrant.

This is the promise of a truly holistic, genuinely integral medicine that because more than just 25 percent of a real human is recognized to exist, that is because more than just the upper-right quadrant is taken to be real, then more than 25 percent of health concerns can actually be correctly addressed, pushing that 70% ineffective rate down to perhaps just 20 or 30% or so, but certainly better than the truncated, partial, fragmented, broken view that now dominate paradigm of orthodox medicine.

So we want to include the wonderful and even miraculous components of the current medical system, and then supplement with treatments that have been developed for some of the other very real dimensions of the human being, dimensions recognized as real, in many cases, going all the way back to some of our earliest cultures. An integral metamodel allows us to do exactly that.



**Niki Gratrix** So I think there might be practitioners listening to this, especially when we talk about the need for much more understanding of the upper-left hand quadrant and these structures and stages and typologies that a lot of practitioners are like, “Oh, my goodness. I only just learned the upper-right and going into systems and the environment. Oh, no! Now, I have to learn all this. Do I have to train in psychology now, too?” And so a lot of them will probably be feeling, “Do I have to train in everything?” And overwhelmed about that.

**Ken Wilber** Right. Right. The basic rule here is a little bit of wholeness is better than no wholeness at all. So a little bit of understanding in the upper left, can start your ongoing process of increasing your integral approach to medicine. And, of course, in this summit, this very summit, we have a half dozen approaches of people showing how very important factors in the upper left make a crucial importance in medicine.

So if one of those strikes you as important, you can study on any bit and maybe incorporate that into your practice. But it's simple an ongoing process. And it's more the basic awareness of the practitioner and not their particular modalities. There's a saying in integral medicine. And the saying has three phrases. The first two phrases are taken from alternative and complementary medicine. The last one is added by integral medicine. The saying is: “Orthodox medicine treats the symptoms. Complementary medicine treats the whole person. Integral medicine treats the physician.”

And all that simply means that there's something like an integral approach truly expands your mind, almost literally. And it points out realities that you might have vaguely realized, but had no words for or hadn't articulated very clearly.

So one of the most common reactions of somebody at an integral stage of development has to reading a book about integral is, “Oh, I knew that!” I could have written this book myself. I knew that.” It's like a homecoming. They're simply being given a map of the territory that they're already inhabiting. And it feels like a very deep connection.

In a sense what this means is that the practitioner is going to change before the client does. The practitioner's whole approach becomes what we call integrally informed. And again, that's simply a process of ongoing education. You simply learn more and more about the other quadrants and its various lines and levels and stage as you go.

No matter what their specific practices are, they are involved in an integral understanding. Now, in almost all cases, they'll definitely change or expand their practices in at least some moderate fashion or detail. They will be thinking, however, about the whole integral system. They'll be thinking about quadrants and levels and lines and so on.

And they'll expand their practice to cover whatever specific areas they feel are especially important in that increasing wholeness. So we'll post several examples of doctors who are using an overall Integral framework on this website for the summit. And so people can check out those practices for some samples.

But the idea is that they'll no longer be misdiagnosing illnesses. They might choose to continue to focus on the upper-right quadrant. And they might add meditation in the upper left and then take the client's present relationships and family origins into account in the lower left.

But if they run into a problem that is specifically generated by extensive shadow material in the upper left, then they would probably recommend a good psychotherapist. They would not start chasing that psychosomatic symptom around by treating it as an organic illness and chasing it with one medicine ineffective after another medicine ineffective after another medicine ineffective. They would go to the cause, which is the upper left.

So they will most likely start to take levels into account and simply start noticing the major center of gravity of a particular patient, and language their interactions with them so as to be as clear and resonant with them as possible, thus substantially increasing patient compliance. So they would adjust their language to their patient's altitude.

But all of this, in any event, is coming from an integrally informed mind. A mind that is aware of these different dimensions, at least that, at least aware of these dimensions and their general characteristics and their ways that they can show up in healthy and unhealthy fashions and some of the typical treatment modalities for all them—no matter which they themselves eventually engage in.

But what they would do in virtually all cases, whether they choose to specialize in this practice and a new treatment is start to create a list of referral material for problems with any and all major disciplines, so problems in quadrants, problems in levels, in lines, in states, and types. Healthcare problems can and do occur in all of those areas.

And so it would be much like a general practitioner. A general practitioner knows essentially all of the major illness in the upper-right quadrant. They know to spot kidney illness. And they know to spot brain tumors. But they don't do the treatments themselves. They have a list of specialists that they recommend.

And so, of course, you can become a holistic specialist. And you can spend time learning as much as you can about all of these factors. The factors are there. The factors are contributing to health and illness. They exist. There's nothing we can do about that. And so we can either learn about them or create a list of our specialists that we can use. But those elements are all very real, very existing, and ignoring them won't make them go away.

So as a practitioner continues to learn about these different dimensions and their role in health and illness, if the practitioner doesn't themselves adopt a new treatment for a specific area, they'll start to create a pool of recommended resources for their patients who need such. This might be a website, a book, a specialist practitioner or a list of practitioner, possibly an organization, or any item they could recommend to their clients if they recognize that they needed help in their particular area. But the practitioner doesn't specialize in it themselves.

So like I say, a GP, a family practitioner, and that might include any of the areas and practices offered by presenters in this summit, as well as any others coming from a real element in a truly Integral framework. So there is a straightforward way to work with this.

**Niki Gratrix** And can we expand a little bit on the topic of this word intuition? It's coming up a lot in the different presentations in the summit, because of this participatory model again. So people are being encouraged to listen to their own bodies

and use their intuition around food, around for example whether a supplement's working for them or not.

And I think it's already an overused word and undefined word. And I think a lot of people don't really know what it means. I think this would link with the lines of development, we could have a clearer understanding about that.

**Ken Wilber** Yeah. Yeah. Well, it is a wildly overused term. And it seems to just be contrasted with a type of analytic knowledge. But if you actually look at intuition and actually give it a definition, you find that there's several definitions. And the fact is each definition is okay. There is a type of intuition that goes with each of the definitions. The only problem is there are a dozen definitions. And most of the people that make a recommendation of intuition don't say which intuition they mean at all. And so it can get very confusing.

Technically, in terms of dictionary definition, all intuition means is that an awareness that's direct and immediate. So it's an immediate phenomena that you notice. And isn't referential or analytical. So as Frances Vaughan points out in *Awakening Intuition*, there's physical intuition, emotional intuition, mental intuition, and spiritual intuition.

These apply essentially to the major states of consciousness that humans have, the ones that she pointed out. So there's gross or physical state intuition, emotional or low-subtle state intuition, mental or high-subtle state intuition, and spiritual or causal state intuition.

McCraty talks about 3 types of intuition: emotional intuition, which is emotional; implicit knowledge, which is a type of mental intuition; and non-local intuition, which is a type of spiritual intuition. Again, all of those exist.

Because these are states, they can occur at virtually any and all levels and lines. There are people whose intuitions spring from egocentric to ethnocentric to worldcentric to cosmocentric levels of Growing Up. And any of these types of intuition can show up in virtually any line. A person whose dominant line is interpersonal will tend to experience intuition mostly in that line. Somebody who leads with moral will tend to experience intuition there, and so on.

As well, each line can attract a specific type of intuition. The cognitive line will attract mental intuition. The emotional line will attract emotional intuition. And the spiritual line will attract causal-spiritual intuition. But if any line is just directly and immediately known or experienced, that is intuition in that line. So there is cognitive, emotional, and spiritual intuition, but also inter-personal intuition, aesthetic intuition, moral intuition, intra-personal intuition, and so on.

And I think each of us can think of intuition fitting each of those. An aesthetic intuition is an direct and immediate intuition of beauty. And so it's not hard to see how intuition can apply to each line. So individuals are constantly accessing most of these types of intuition at some level and in some line, because they have access to all major states—gross, subtle, causal.

But they probably aren't aware of this. So simply becoming aware of, for example, gross, subtle, and causal types of intuition will start to make them conscious. And a person can

make use of various products and services that help to develop intuition, even if the particular program tends to specialize on just one type.

And, in fact, most intuitiontraining programs will focus on just a few types of intuition, usually the types the author are familiar with. Again integral approaches to virtually every topic are very rare.

**Niki Gratrix** So one of the things that people are going to learn on this summit, there's some quite disturbing facts from some of the real leading scientists of the day. For example, that there's 80,000 chemicals in the environment at the moment. There are 2,000 more added each year.

These scientists have been to Congress and asked why is the burden of proof of safety on the public and not on the corporations? And it's becoming clearer and clearer, as well, amongst us health professionals that we have this imbalance with corporate powers. There's a definite battle going on there.

But this wider issue is that obviously you can't consider your own health without these political and economic aspects coming into it, as well. And I think people are in personal crisis with personal fatigue issues. And I think many people are thinking the world's gone pretty crazy, as well. And that we're facing some major global crisis. Perhaps, you can share, very appropriately, with this fantastic Integral model, what your thoughts are on some of these issues that are going to be definitely impinging on us and our individual health. It's felt every day in the practitioner's world and in the patient world. What's going to happen?

**Ken Wilber** Yeah. Yeah. Definitely. Definitely. There's no question that we've entered a global age. Even 50 years ago, the major problems that plagued nations could usually be addressed by the particular nation taking certain steps to alleviate them. But today, virtually every major problem faced by a nation cannot even be addressed by something that nations do alone. The issues are all almost completely transnational and global.

If the United States cut its carbon emissions entirely, that would have virtually no effect on global warming—pretty much every nation on the planet has to join in this effort. The United States' problems are deeply transnational and global. And nothing the United States does alone is going to fix them.

The same is basically true of problems and crises in the economy, terrorism, fossil fuels and alternative energies, the worldwide financial system, planetwide epidemics, possible nuclear catastrophe, poverty, global warming and the environmental crisis. And this includes items going all the way down to environmental toxins, which are a major source of undiagnosed illnesses in today's world. All of those are essentially transnational, global, worldcentric problems. And it's a horse race.

As experts in many different fields have pointed out, recent advancements in all sorts of areas—and areas that you wouldn't have thought of it—but artificial intelligence, genomics, robotics, nanotechnology, among others, these are supposed to be areas that help humans. But all of these have made it clear, at least possible, that humanity might indeed destroy itself from those technologies.

And these are all conclusions made mostly by looking at just the RightHand exterior

quadrants. But things aren't much better in the Left-Hand interior quadrants, where we find the seeds of religious war, shadow roots of terrorism, clashes in different worldviews, Jihad in a dozen different forms where it's okay to murder, torture, burn, or behead an unbeliever because unbelievers have no soul.

None of this is helped by the startling, even alarming fact that some 70 percent of the world's population is at an ethnocentric or lower level of development. And ethnocentric levels are marked by a deep "us versus them" attitude.

In fact, in terms of world peace, it's even worse. We saw that the definition of first-tier level is that it thinks its truth and values are the only real truth and values in existence. It's impossible to have world peace or harmony with a majority of population at first tier. None of its levels will ever, ever, agree with each other about fundamental values.

And so peaceful accord is almost out of the question. And yet, we also saw, only 5 percent of the population, as yet, is at second-tier integral stage of development where peaceful harmony might actually be found.

Almost every major thinker, in trying to decide what the fate of humanity will be in the coming year, focuses on the Right-Hand quadrants and usually the Lower Right. Fix global warming, fix the environment, and if we do that, all will be well. And if not, we're extinct. Or look to LowerRight technology. The technological singularity—the coming of super-intelligence in machines will both answer and ask all the pertinent questions, opening earth to a real Eden.

Alternatively, the converse side has also been argued. The creation of a super-intelligent machine will be the last creation human beings ever make since that super-intelligence will take over the planet entirely for its own purposes, which just happen not to include humanity.

All of those future visions are based on Right-Hand calculations. Yet, a growing number of people claim that, by whatever terms, Left-Hand factors are the most important and are what will really define humanity's future. We are, at this point in time, they all maintain undergoing a worldwide transformation based on a new paradigm, which itself is based on recent discoveries in various sciences, all of which point to basic interconnectedness, interwovenness, and unity of all things.

To this unifying science, sometimes is added a dose of Eastern Zen or Daoist unity consciousness. Now, what they are reporting is simply some of the discoveries of second-tier integral awareness, which is true enough. But what all of them overlook is the developmental component to that. While it's true the integral stage is a profoundly unifying view of wholeness, the old views, the old paradigms, whether mythic traditional, modern rational, or postmodern pluralistic, don't just go away.

They don't just disappear to be completely replaced with this new holistic paradigm. Rather, they remain as stages that human beings have to go through in order to get to this new transforming stage of integral wholeness. And unfortunately, so far only 5 percent of the population has done that. And we're nowhere near having a large number of people move into that harmonious level.

So is there no good news here? Actually, of all the different areas that are undergoing profound shifts, discoveries, even revolutions, and are claimed to be the basis of a global transformation, one item stands out as particularly promising. It's what happens as the leading edge of historical evolution in the interiors—in this case, the integral stage—becomes 10 percent of the population.

When the leading edge reaches 10 percent, a type of tipping point seems to occur. And all of a sudden, the novel and emergent values of the new leading-edge level tend to permeate and spread throughout the culture. For example, when the rational modern level of development reached 10 percent, around 300 years ago, we had the French and American Revolutions, the Enlightenment, the rise of modern sciences, the abolition of slavery, and so only 10 percent of the population actually and directly embraced any of those values. But those values somehow became acceptable to the culture at large—this tipping point—allowing those who were at those leading-edge stages to have a disproportionate say in societal decisions.

Likewise, when the pluralistic multicultural stage reached 10 percent, in the late 1960s, the whole postmodern epic swung into being with the civil rights movement, the environmental movement, personal and professional feminism, and so on—all driven by the pluralistic stage's non-marginalizing and beginning inclusiveness motivations.

These were profound human transformations driven essentially by 10 percent of a population reaching the leading edge of interior transformation. We have every reason to believe that this will occur when second-tier integral moves from 5 percent, where it is now, to 10 percent, which some experts think might occur as early as a decade or two.

This would be a transformation unlike any other transformation in human history. All of our previous transformations have been first tier based on deficiency. We've never had a second-tier transformation based on fullness and superabundance.

We've never had a consciousness that was dedicated to wholeness, unity, harmony, and radical embrace. Even though only 10 percent of the population would actually be at these value stages, the values themselves would permeate and begin to saturate the culture, if history is any lesson, with enormous and profound transformations resulting exactly as happened in the past with each new leading-edge evolution.

What we see with these new advances in healthcare that we're discussing is that leading edge tending to emerge and drive our approach to healthcare and wellness itself with the approach becoming more whole, more unified, more inclusive, more comprehensive, more embracing, as we've seen in this summit.

Likewise, this means our own wellbeing is being addressed in increasingly better and more adequate and more comprehensive ways. We're finding better ways of getting better and staying better.

This is a very exciting and promising time to be involved in wellness. And let me just say, it has been a delight and pleasure to be here sharing these ideas with you and our listeners.

So thank you to you and all of our guests. It's been an honor!

**Niki Gratrix** Ken, thank you so much for sharing your time and so generously. And that was fantastic information on some of these cutting-edge science and advances that we have in medicine. It's been profoundly transformative and interesting listening to you.

So I hope our audience will also appreciate the info. This was great material! And I recommend everybody listen to it a few times if they need to. That's good. It'll take a few times for it to settle it and for us to understand this amazing Integral map that Ken has shared. So thank you very much, everybody! Take care. Bye for now!