# In Mental Health Let's Talk About Transformation Ongoing

Kevin A. Sensenig Draft 1.03 2025 September 29 - October 23

I advocate for, in mental health, addressing the mainstream model plus those who think different, with the following point:

Let's talk about transformation of thing, event, spatial-temporal-semantic fact as such, observation, subjective perspective ('from the point of view of… and its connextions') _____A_____ given: state of mind, state of being, state of things, environment, context, interconnected, at-once, all things. Or, fact, delta, and explanation. Or, both. And each moment is a transformation already. Then, A, and B, and C, and D; then, things or events or perspectives A, then C, then A', then B, then D. And so forth.

There are at least two ways to describe a thing or event. First is as objects that unfold in n-space, their environment, and cause and effect, including a set of objects and their relations, causes, effects, and space. We can say that these are always developing, and that a shift in perspective can add to what is determined, observed, taken up, or felt to that point. Second is all as equality, no-thing, in that an object or event cannot be seen as something either existent or nonexistent, that and all things are seen as no-birth and transformation, in an ongoing no-gap transformational space, boundless, infinite. This is both virtual *and* reality in a multifaceted evident space.

And reality's transformation, not discriminating things, is total, at-once, multipath, multiscale, multifaceted, and ongoing, at each point, vector, n-relational, immersive, universal, immediate field and scale and position, right at each place and angle and no-time time no-gap positional-spatial-semantic immersion and interval.

Either of these standpoints can be fruitful. German philosopher Wittgenstein, in Tractatus Logico Philosophicus, steps through a multiview logic showing that one evaporates into a mystical place akin to the the second way – there is always another proposition, an image, and then further, virtual. Buddhism indicates both are useful, and the first can be problematic or not, and the second is more of undefinable yet present reality, detached from a rigid understanding of objects and a fixed view. I wonder if this dynamism can be expressed in a way that catches the attention of the mainstream Western psychology and mental health view, leading to more fluid and realistic standpoint, inquiry, and treatment.