Dreaming the (Lost) Self in Psychotherapy: Beings in Bodyspacetime in Collision, Confusion and Connection

Loyola McLean and Anthony Korner

Abstract

From the perspective of human attachment research, human beings develop in the matrix of relationships. The child's relationships begin in profound somatic ways, inside the mother's body or perhaps within the parents' minds. After thousands. millions of interactions with care-givers they then organize an embodied and psychic self that is felt and known. Yet for those who have been impinged on too early by trauma, loss or neglect, dissociation has been woven into their way of being with parts of experience of self cut-off or hidden. Those who suffer loss or trauma later in life must also traverse a path through disorganization of experience, with attendant disorientations in space, time, reasoning, language, perception and the somatic self: world and self can become, for a time, very unfamiliar. Contemporary psychodynamic psychotherapy seeks to foster (re)connection by (re)establishing a sense of safety and orientation, and pays very close attention to embodied and felt experience within the 'framed' period of the session, a coconstructed illusion of fixed spacetime. The affective tone of these encounters are privileged for 'thoughts connected as we feel them to be connected are what we mean by personal selves' and resonance with the felt/body sense promotes the creative unfolding of self. Like the traditional Australian Indigenous notion of 'The Dreaming 'they are non-linear and associative moments. The fascinating space emerges where past, present and possible future coexist and collide in the therapeutic encounter, with unusual experiences of the bodyspacetime emerging that are played, worked with and dreamed about to create meaning and new organization. This paper will describe (with permission) the vignettes (including some transcript fragments) of several psychodynamic psychotherapies to illustrate Dreaming/playspace moments that cross 'normal' experience boundaries into an intersubjective bodyspacetime, including linguistic embodiment/'representation,' which 'remind,' restore or (re)conceive self.

Key Words: Self, Attachment, Trauma, Psychodynamic Psychotherapy, Psychosomatics

1. The Relational Origins of Self: The Song and the Dance

What daring it takes
To play for eternity
To play as ravines sweep down
To play as a river flows

Boris Pasternak²

From the perspective of human attachment research, human beings develop in the matrix of relationships.³ One could say the experience of 'being human' begins in this interplay. This beginning involves a process of exchange that, under good conditions, often has the quality of play with evidence of narrative or dance-like, song-like form from the outset.⁴ The child's relationships begin in profound somatic ways, with the union of something from both biological mother and father but also often within the mind of the parents. Having traversed the (extra)ordinary boundary of the mother's body the child is born and continues a relationship already begun in utero. After thousands, millions of interactions with care-givers the child organizes a relationship to self and other and in time, this can be both felt and known, conscious as well as lying outside immediate awareness in what we now think of as procedural memory or 'the way things are.' This overall sense of worldview takes on the quality of reality to the developing child. Even though the child may have the sense of personal boundary and the experience of the passing of time, s/he is not conscious of the way experience is being shaped by mother and father/other as they gaze at the child, hold them, tend to them and their needs with regularity and perhaps delight and enter into interactions that are characterized by their own song, shape and rhythm.

This notion of self as a flowing process is not a given. It requires a facilitating environment. It is in some ways similar to the traditional Indigenous Australian notion of 'The Dreaming' that refers to the continual flow of images in experience pertaining to the environment where the symbolic, the actual, the past, present and future simultaneously coexist. This song, this dance, this conversation, has been seen in modern work on infant development as foundational in the child's experience of relationship and their development of self. Work by Trevarthen on the proto-conversation between mother and child describes how the early call-andresponse between mother/care-giver and child is song-like and contains, when all is going well, a contingent response to the child, but also the something more that marks that the mother, herself, has responded.⁷ The response is not a mere replication, not simply a mirror or echo but rather contains recognition and something additional that is 'of the other', in the words of Russell Meares in the model he developed with Robert Hobson, it is a response of 'analogical fit'. It takes up the important central theme of the infant's call while developing it in the response and implicitly facilitating the child's creative entry into the flow of time and space.8 In time the child's autonomy emerges: one might say that the child becomes a player in the larger human world, capable of maintaining self and the capacity for play even in trying circumstances, rather in the manner of the poem by Pasternak where it is conceived as possible 'to play for eternity/to play as ravines sweep down/to play as rivers flow.'9

The Conversational Model of psychotherapy, a contemporary psychodynamic psychotherapy developed by Hobson and Meares argues that the self emerges when these conversations between child and another have arrived at the

development of a state of 'aloneness-togetherness', where one can feel connected to self and other despite a separation and the self has a sense of continuity and cohesion and a lively sense of the interior life. 10

2. The disintegration or constriction of self through trauma

For those who have been impinged on too early or too profoundly by chronic complex relational, as well as overwhelming trauma, loss or neglect, a disconnection from self and other ensues and loneliness and emptiness of self can prevail. At this stage, a sense of self is not established but rather is emergent.¹¹ Without the facilitating environment, there is little flow and it is likely that infants are left with inchoate feelings that can't be organized into the sense of flow that fosters the development of self and the engagement in language that provides mental spatiality with the articulation of present, past and future and a vehicle for the expression of relationship. What is now understood as 'a disintegration of mental life', known as dissociation, may follow trauma or loss, or may even reflect a primary level of organization in circumstances where early trauma has been marked. 12 In such cases the attachment forms around trauma and one might speak of 'traumatic attachment'. This is especially so if the source of the fear is an attachment figure such as a parent. If this is a chronic experience this dissociation can become woven into a very way of being with parts of experience cut-off or hidden. Attachment theory notes that even hard won and longstanding organization of response can be disorganized by extreme experiences of unresolved terror. 13 The facts in time or space can be distorted or denied, or the feelings associated with them similarly cut-off or out of awareness. 14 This is not to say that the individual cannot regroup or organize a strategy to manage self, other and the world, but the coherent sense of a rich integration of lived experience can remain broken down: consciousness is in some way restricted.

Those who suffer loss or trauma later in life must also traverse a path through disorganization of experience, with attendant disorientations in space, time, reasoning, language, perception and the somatic self: world and self can become, for a time, very unfamiliar.¹⁵ Reorganization and adaptation require real work. Mourning rituals throughout the world acknowledge that the first year following the loss of another is a profound year of turbulence and that we require the time to mourn and the ritual and relational space to reorganize.¹⁶

3. Psychodynamic therapy as the intersubjective space of reorganization

The Conversational Model of psychotherapy seeks to foster (re)connection by (re)establishing a sense of safety and orientation, and pays very close attention to embodied and felt experience within the 'framed' period of the session, a co-constructed illusion of fixed spacetime.¹⁷ We aim to meet together, patient and therapist, in the same place and at the same time(s) each week. The affective tone of these encounters is privileged for 'thoughts connected as we feel them to be

connected are what we mean by personal selves' and resonance with the felt/body sense promotes the creative unfolding of self. ¹⁸ Hobson once declared: 'I can only find myself in and between me and my fellows in a human conversation.' ¹⁹ He spoke of a 'Fellow feeling': a sense of matching, of connection to the essence of another's conversation.

The fascinating space emerges in such a connected conversation where past, present and possible futures coexist and collide in the therapeutic encounter, with unusual experiences of the body-space-time emerging that are played, worked with and dreamed about to create meaning and new organization. Like the Dreaming they are non-linear and associative. This remainder of this paper will describe (with permission) the vignettes (including some transcript fragments) of several psychodynamic psychotherapies to illustrate Dreaming/playspace moments that cross 'normal' experience boundaries into an intersubjective body-space-time, including linguistic embodiment/'representation,' which 'remind,' restore or (re)conceive self.

4. 'Creating a Space for Yourself'

In a taped session with a patient where the therapy is coming up to a break, the patient is talking about stepping out with new directions in career, finances and relationship.²¹ The material is rich with metaphors of space and time. One theme that reappears is the notion of 'Creating a space for yourself,' articulated most clearly initially by the therapist but as a distillation of what has resonated in what the patient has presented before in the session. Interestingly the session begins with a casual reference to the audio recording working but could be seen as a commentary on the whole session's theme of someone ready to move out to a new sense of engagement with self and world with the patient asking, 'Good to go?' and the therapist echoing reassuringly, 'Good to go.' The theme of the session is foreshadowed.

The young man is striking out and wants to do things differently from his parents whose past financial stresses had a huge impact on him and the family. In an embodied description he says, 'they tend to come over the top of me...' and in the next turn the therapist reflects: '...it's sort of creating a space for yourself in a way, isn't it, instead of getting overridden or bulldozed or something.' The sense is both clarified with the violence of it reimaged and amplified but the determinacy is softened to leave space through the or 'something.' This is a very intersubjective space, co-created and respectful, but each is encouraged to 'speak their mind.'

The language throughout has an associative quality alongside the linear parts of the narrative. This dream-like quality is a restorative mode where something imaginative can take place: the lost self can be dreamed and found. There is something similar here to the work of the *Ngankari*, the traditional Indigenous Australian healers who will send out a part of their spirit to find the lost spirit of their charge.²² Both healer and the one to be healed must be connected to the

Dreaming, the larger human world. In creating more of a space for self in the session the man is becoming, as he converses, and the two think and feel together, 'Good to go.'.

Although the single session has its own theme and narrative form it also is intertwined with the larger narrative of the therapy. Indeed he picks up a reference to a song mentioned months earlier and uses it metaphorically, likening his 'realization of my calling' to the words of the song ('the pipes the pipes are calling') and realizing a connection to the world that is not limited by the worldview of the family into which he was born.²³ There is the sense that he is really 'good to go.'

5. 'Vera': the truth hurts but it can set you free

Terrible derogation, devaluing and physical punishment were the central background experience for an older woman who presented for therapy. Initially when asked about her family in the assessment she broke down into incoherence, but returned to the next session and has faithfully attended since. This collision with her unstoried past derailed her discourse and behaviour for that first session. We have since been talking together to help her find that lost self and restory herself.

She loves 'play'. Play has been noted to be essential to the development of self and reflective function.²⁴ She noticed that when the therapist introduced taping the sessions, the therapist became less spontaneous and 'in there' and appropriately said: 'I have had too much of that [i.e., neglect and being ignored]. I need you to do what you were doing before and be right there with me.' The therapist was then required to take a deep breath and relax and not be afraid to be real. While physically present, the therapist had 'removed' her playful self and the absence was noted.

Her face was initially often turned in shame but now can look more at the therapist, but a quick gaze aversion signals that traumatic shame and fear has intruded on her flow again. Her voice has a harsh quality and it 'bursts' out of her, something she is observing and now trying to find some modulation for: 'I don't want to bellow at you!' She positions herself at the far end of a couch rather than close near the therapist and won't sit before the therapist sits.

Her affect previously was full of terror, shame and a fear of rejection, often saying, 'Shall I go now?'/'Do you want me to go now?' at the end of the session, or earlier at the end of a 'turn.' It was as if the old historical figures of those whom we termed Tyrant 1 and Tyrant 2 were still in the room. The new space is here, but initially the old dramas and scripts and old ghosts hold the body and mind tightly. She still takes long turns as 'I don't have anyone to talk to' and the stories gush out and the therapist has needed to learn to shorten responses to something pithy that could quickly enter in the small spaces left and keep a real engagement going. Vera keeps it moving, often away from pain. Yet she loves stories and we hear many

discursive tales that surround the themes of the session. She loves wordplay and together we get to play with words in a way other patients don't need or want with mutual enjoyment of this. Books, tales, stories, all form part of the activity: a feeling almost of the Canterbury tales, pilgrim's tales on a journey from a woman who actually does loves the Camino walk.

Recently she noticed and reflected on how much she pushes herself to overcome the constriction in her throat, heard in her voice as an embodiment of her 'conflict over speaking out.'²⁵ We could then explore the terrible shame and fear of shame that was her experience when she did try to speak in her childhood and was crushed. An image of the small trumpeting elephant had emerged in a creative restoration. She 'trumpets loudly' when she is distressed and lonely and wants to be one of the herd! Before she would have kept quiet or it would burst out of her Tourette's-like. Yet now she can also trumpet loudly in her excitement or joy, with more positivity and less shame. Nevertheless she fears it is all taking too long, she is too much of a burden, she is not worthy of this endeavour and the investment of this time. The past speaks even as it is changing in the present. She must slowly come to face the truth of her past abuse and integrate these experiences into her new and emergent, 'found' self.

6. Bodyspace shifts: 'You're head has moved two inches to the right'

The young woman enters the normal Friday session in a distracted and agitated fashion and tries to settle herself in her accustomed position on a cushion on the floor, a position she finds literally and figuratively grounding. She looks at the therapist in a daze and says: 'You don't look normal. You're head has moved two inches to the right.' While the therapist could have inquired or explored this strange opening remark she replies with one more mundane but equally seemingly out of context: 'Bad day, huh?' The terrible steam goes out of the patient and she begins to come into connection: 'How did you know?' No definitive answer is initially given, but it is clear to both by partway through the session, that if one is discombobulated, space, time and body are disrupted, one is 'lost.'26 Perhaps in this moment we symbolically accept this communication as part of the flow of connected conversation, to be understood without great efforts at uncovering hidden meaning. From past experience which she has tracked the therapist knows something of that wild look with which the patient entered the room and intuitively leaps to a possible connection. She is free to respond but the Model suggests she must observe 'what happens next,' noting whether the patient's flow or connection improves or is constricted or disrupted as a result of the intervention.²⁷ Does the song and the dance become richer? Is the patient better connected to self and other?

Events since the last session had indeed been triggering to the extent that the patient has entered a traumatic state of relatedness and believes at one point that the therapist is attacking her. This 'reversal', when the old perpetrator/victim dynamic enters the therapeutic relationship, is an important part of the unusual

distortions of bodyspacetime in trauma.²⁸ The therapist responds: 'I think you are confusing me with someone else. I wonder who that might be?' The therapist knows there are a number of 'usual suspects,' but until the patient looks within, the specific answer for the specific moment is undetermined. She reminds the patient of who they are together, a different dyad than those from the past, and opens up a chance to reconceive the current traumatic dynamic as having come from real experience, formerly out of awareness and now connected to in the present that perhaps can now be reflected on and reintegrated.

7. Conclusions

Moments that are part of the sense of dream-like, Dreaming-like connectivity of bodyspacetime are essential to the process of therapeutic restor(y)ation and (re)conception. Two selves meet and are held in mind and something new for both emerges. Human subjectivity, the ongoing experience of being, or 'The Dreaming', are the primary mode of human experience and as such, in many cultures, are taken as the primary source of 'evidence' about life. For the practice of psychotherapy evidence derived from this field is of central importance. The self matures from within the midst of an individual in relationship with the environment and the many others that are encountered. A therapeutic relationship provides the particular relational environment that fosters such maturity. A mature self, when it emerges, is a generator of bodyspacetime, in the first place for the person's own self and then, with further development, becoming a generator of the kind of space for others that engenders players in the human world. Finding one's place is finding oneself in interpersonal space and communicative time in a deeply embodied way. Perhaps this is what is meant by 'finding one's calling,' a calling that began with call of one to another and the playful or heartfelt response.

Notes

¹ William James, 'Stream of Consciousness,' in *Psychology: Briefer Course*, (London: Macmillan, 1892), Chapter XI.

² Boris Pasternak, 'Bacchanalia,' trans. Anesa Miller-Pogacar, in 'Postcommunist Postmodernism --- An Interview with Mikhail Epstein,' Ellen E. Berry, Kent Johnson, and Anesa Miller-Pogacar, 110-111. *Common Knowledge*, 2, no.3, (1993): 110-111.

³ John Bowlby, *The Making and Breaking of Affectional Bonds* (New York: Routledge, 1979); Bowlby, John, *A Secure Base: Parent-Child Attachment and Healthy Human Development.* (London: Basic Books, 1988); Loyola McLean and Marie-Thérèse Proctor, 'The Pilgrim Road to Human Flourishing: When the Psychotherapeutic and the Spiritual Journey Meet,' in *Beyond Well-Being*:

Spirituality and Human Flourishing, eds. Maureen Miner, Martin Dowson and Stuart Devenish (Information Age Press: 2012), 231-255.

- ⁴ Colwyn Trevarthen, 'Conversations with a two-month-old,' *New Scientist* 62 (1974): 230-235.
- ⁵ Robert Maunder and Jonathon Hunter, 'Attachment and psychosomatic medicine: developmental contributions to stress and disease,' *Psychosomatic Medicine* 63 (2001): 556-567.
- ⁶The Dreaming is the name for the spiritual worldview of Aboriginal Australians who relate to a non-linear view of bodyspacetime where the past and present and the future are co-present. Acknowledging this reality is central to the recovery of Indigenous people traumatized by invasion, colonization and their sequelae. Helen Milroy, Plenary address on 'Dreaming and Culture' (World Congress for Psychotherapy, Sydney, Australia August 25, 2011).
- ⁷ Since the 1970s the research on this has been accumulating led by Colwyn Trevarthen and colleagues. Trevarthen, 'Conversations with a two-month-old.'; Colwyn Trevarthen, 'Intrinsic motives for companionship in understanding: Their origin, development, and significance for infant mental health,' *Infant Mental Health Journal* 22, no.1-2 (2001): 95-131; Colwyn Trevarthyn and Stephen Malloch, 'The Dance of Well-Being: Defining the Therapeutic Musical Effect,' *Nordic Journal of Music Therapy* 9, no. 2 (2000): 3-17; Stephen Malloch and Colwyn Trevarthen, 'Musicality: communicating the vitality and interests of life,' in *Communicative Musicality: Exploring the basis of human companionship*, eds. Stephen Malloch and Colwyn Trevarthen (New York: Oxford University Press, 2000), 1-12
- ⁸ Russell Meares, *The Metaphor of Play: Origin and Breakdown of Personal Being*, 3rd Ed. (New York: Routledge, 2005), 3; Robert F Hobson, 'Imagination and amplification in psychotherapy,' *Journal of Analytical Psychology* 16 (1991):97.
- ⁹ Meares, *Metaphor of Play*.
- ¹⁰ Meares, *Metaphor of Play*, 203-204; Robert F Hobson, 'Imagination and amplification in psychotherapy,' 97.
- ¹¹ Stern articulated the notions of the emergent properties of the self in infancy: Daniel Stern, *The interpersonal world of the infant* (New York: Basic, 1985).
- ¹² Erik Hesse and Mary Main, 'Disorganized Infant, Child and Adult Attachment: Collapse in Behavioural and Attentional strategies,' *Journal of the American Psychoanalytic Association* 48 (2000): 1097-1127.
- ¹³ Mary Main, Ruth Goldwyn and Erik Hesse, *Adult Attachment Scoring and Classification Systems* (Unpublished manuscript: University of California at Berkeley, 2002).

¹⁴ Ibid.

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¹⁵ Ibid.

¹⁶ In recognition of this need scoring for the Adult Attachment Interview will not score a loss for markers of being unresolved until after the first year post-bereavement. Main et al, *Adult Attachment Scoring*.

¹⁷ Robert F Hobson, 'Imagination and amplification in psychotherapy,' 97; Meares, *Metaphor of Play*.

¹⁸ James, 'Stream of Consciousness,' Chapter XI.

¹⁹ Robert Hobson, Forms of Feeling: The Heart of Psychotherapy (London: Tavistock, 1985).

²⁰ The Dreaming is the name for the spiritual worldview of Aboriginal Australians who relate to a non-linear view of bodyspacetime where the past and present and the future are co-present.

²¹ Anthony Korner, unpublished session transcript.

²² Ngangkari are traditional Indigenous Australian healers. A group of them won the Sigmund Freud Prize in 2011 for psychological healing, sharing it with Dr Helen Milroy and Aunty Lorraine Peeters.

²³ From one version of the song 'Danny Boy', based on the later version by Frederic Weatherly, 1926.

²⁴ Donald Winnicott, *Playing and Reality*, (1971; London: Routledge, 1991); Peter Fonagy and Mary Target, 'Attachment and Reflective Function: Their Role in Self-Organization,' *Development and Psychopathology* 9 (1997): 679–700.

²⁵ The notion of 'conflict over speaking out as important in psychogenic voice disorders was articulated by Janet Baker, 'Women's voices: Lost or mislaid, stolen or strayed?' *International Journal of Speech-Language Pathology* 12, no. 2, (2010): 94–106, and it was developed with an understanding of traumatic constrictions of self by Margaret Jacobsen (Masters diss., University of Sydney, 2011).

²⁶ Main et al, Adult Attachment Scoring.

²⁷ Meares, *Metaphor of Play*.

²⁸ Ibid.

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