On the Way to the Altar: An Illustration of Transpersonal Psychoanalytic Psychotherapy

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This paper illustrates transpersonal psychoanalytic psychotherapy through a detailed clinical example. A creative synthesis of Voice Dialogue work and Dreamtending, applied through storytelling and active imagination, is presented with a patient who is about to be married. Areas such as the therapeutic relationship including skills, techniques, clinical decisions, goals, interventions and the therapeutic space and presence are explored and discussed throughout the paper as they relate to transpersonal psychoanalytic psychotherapy.

Keywords: dreamtending, voice dialogue, projective identification, introjection, transitional object, transformations in "O," transpersonal psychoanalytic psychotherapy

My patient’s was on the way to the altar. And so was I. We were both about to be married. For each of us, the advent of marital union was a deep commitment of life-changing order as we bound our destiny to that of a loved one. For my patient, the prospect of marriage was also a profound cause of acute fear and anxiety. The ambivalence she felt about her imminent marriage was paralyzing, causing her to be depressed and quite worried about whether she was doing the right thing.

The synchronicity of our each getting married demonstrated that each of us was on the path of the emergent self, catalyzed by the process of marital union. As I was also facing that same path of life-altering commitment, I felt a deep empathic regard for the commitment that my patient was embarking on as well and I was called, through our work together, to grapple with the nature of that commitment in both its catalytic and its daunting dimensions.

In the process of working to understand and to alleviate her great ambivalence and the shame that gave rise to this foreboding voice within her, we unfolded a creative synthesis and original application of Voice Dialogue (Stone & Stone, 1998) and Dreamtending (Aizenstat, 2006, 2011) as a unique, somatically informed exploration of active imagination (Johnson, 1986) and creative writing. Voice Dialogue (Stone & Stone, 1998) is a process of engaging parts of the Self and inviting the patient to embody those voices, one at a time and in the first person, to speak directly from that selected aspect of the Self. The therapist then guides the patient through dialogue with the selected, embodied, foregrounded aspect of the patient’s Self. Dreamtending (Aizenstat, 2006, 2011) is a process of engaging dream images by entering into processes of association, amplification, animation, and/or action with the selected dream image. The therapist may invite the dreamer’s associations to the image. The therapist may then invite the dreamer to amplify the image through thick description or poetry or some other creative elaboration of the dream image; to animate the image through painting, or dance, or clay, or some other creative means; and, finally, to take action on a dream image, bringing it into symbolic material reality. Creatively combined and applied through a practice of creative writing, these interventions of Voice Dialogue and Dreamtending illustrate a way of working in transpersonal psychoanalytic psychotherapy.

By transpersonal I mean a psychotherapy that holds great regard for the spiritual nature...
of existence and a conversation with faith, which harbors within its mercurial waters an acknowledgment of the unknown, unknowable mystery of life—that which Wilfred Bion symbolized as “O” (Eshel, 2019). By psychoanalytic I mean a psychotherapy that holds great regard for the unconscious (Brown, 2021) and for the way in which psychic meaning is simultaneously approachable and elusive (Civitarese, 2016); I also mean a psychotherapy that holds great regard for that very presence of the ubiquitous un/conscious that forever binds together the known and the unknown dynamics of consciousness like “Siamese twins,” as James Grotstein (2007) would say. Taken together, this regard for the spiritual nature of the unknown, unknowable mystery of life and this regard for the un/conscious dynamics of the psyche has the impact of engendering a psychotherapy that addresses itself, implicitly or explicitly, to questions of faith and to questions of ultimate meaning. These are the main arteries of a transpersonal psychoanalytic psychotherapy. As I describe this psychotherapeutic treatment with my patient, I will illustrate these main arteries running through the body of our work together.

**Voice Dialogue**

This patient and I had been working together for a bit more than five years at this point in the therapy. A successful business woman in her mid-forties, set to marry a man who was already retired in his early fifties, she was new to the process of psychotherapy. Early on in our work together, we began a Voice Dialogue process, identifying and working with voices of the controller, the protector, the integrated self, and a myriad of other voices that pertained to our emergent work. Working together in person, we would have two chairs for her to shift between with the initiator (the controller, the protector, or the integrated Self) in one chair and the myriad of voices to explore, with permission from the controller or protector or integrated Self, in another chair. Through this process of Voice Dialogue, the idea of working with parts of the Self was introduced and embodied, and the transpersonal psychoanalytic therapeutic space, therapeutic relationship, and therapeutic presence was seeded.

Here is how we began the Voice Dialogue work:

**Therapist:** May I speak to the controller?

**Patient:** Yes.

**T:** Who am I speaking with?

**P:** The controller

**T:** Welcome. I recognize that you make the decisions about who can speak, who gets space.

**P:** Yes.

**T:** Would you allow me to speak with the voice of shame?

**P:** Yes.

**T:** Thank you. I invite you to shift to this second chair.

**P:** [Patient gets up and shifts to the second chair in the consulting room that I have made available for this Voice Dialogue work.]

**T:** Who am I speaking with?

**P:** The voice of shame

**T:** Thank you for speaking. What is it like to be you, as the voice of shame?

**P:** I feel bad all the time. No matter what is happening, I feel ... wrong. Like The Self shouldn't be taking up space. Like The Self shouldn't exist.

**T:** That sounds very draining. Exhausting.

**P:** I carry a great weight. A great burden. I keep The Self from getting hurt.

**T:** Oh? How do you accomplish that?

**P:** Well, I tell The Self she is wrong, so she won't be disappointed when other people find that out.

**T:** I see. So you tell The Self how to feel? And how does your body feel?

**P:** Sort of balled up in my fortress.

**T:** It seems like you look down at the floor; is that right?

**P:** I guess so.

**T:** It seems like you feel threatened; is that true? Or is it just my imagination?

**P:** No, that's very true. It's not safe.

**T:** I see.
P: The Self doesn’t understand that.
T: I see … that feels quite important for us to know together.
P: [Long silence.]
T: Thank you for speaking with me.
P: Sure.
T: I’d like to speak with you again in future sessions, with the permission of the controller.
P: OK.
T: Is there anything else you’d like me to know at this moment about what it is like to be you, as the voice of shame?
P: Well, it’s very dark in here.
T: I see. Thank you for telling me. Anything else for now?
P: No.
T: OK. Can I ask you to shift chairs to speak again with the controller?
P: [Patient shifts seats. Sits silently.]
T: Thank you for allowing me to speak with the voice of shame.
P: OK.
T: May I speak with the integrated Self?
P: OK.
T: Who am I speaking with?
P: The integrated Self
T: What was that like for you to hear from the voice of shame?
P: Both weird and relieving.
T: How so?
P: Well, the voice of shame usually stays in my head. So it was weird to have it talk with you out loud. But strangely relieving too.
T: I look forward to more conversations with several different voices as we see who wants to speak.
P: OK. That would be interesting …

Transpersonal Psychoanalytic Psychotherapy

The transpersonal psychoanalytic therapeutic space created was one in which there was a balance of structure and spontaneity. We would begin with one of the initiating voices (the controller, the protector, or the integrated Self), which the patient would inhabit in the first person, and then we would shift to one of the voices, or parts of The Self, that she needed to hear from (such as the voice of desire, the voice of anger, the voice of the child), which the patient would inhabit in the first person. We would then shift between these voices to have a dialogue. The voices we called on arose spontaneously, but we always returned to the initiating voices to ground the work. Through this process, the oscillation between structure and spontaneity was anchored as the rhythm of the therapeutic space, where exploration and consolidation operated as a collaborative pair of psychic functions.

Transpersonal psychoanalytic therapeutic presence was also seeded through this process, which deepened over the course of our work together. The presence we cultivated between us was one of patient attention and compassionate curiosity. As I modeled an open, caring, and courageous presence, my patient also practiced these qualities of attention and being.

This space and presence was the ground from which our transpersonal psychoanalytic therapeutic relationship took root. I believe my patient came to trust that the rhythm and pace of the work was an attuned negotiation where we would only adventure as far as her readiness would allow and not any further. Importantly, the pace was attuned to her unconscious as it emerged and expressed itself in the psychic material. The unconscious led the way, and we followed with my therapeutic guidance and clinical decision making.

Divine Relationality

I would characterize the transpersonal psychoanalytic relationship as one of what Jungian analyst Helen Marlo (2021) invokes as “divine relationality.” By divine relationality, Marlo means a space where the patient can relate to spirit directly for support, particularly where human relationships have disappointed or failed the patient. I would extend this divine relationality to the therapist’s relationship to spirit as well as to the spirit within her patient. In the same way, I believe that the patient comes to regard and to resource the spirit within her therapist. This concept of divine relationality is one way of expressing the faith involved in working from a position of transformations in O.” The clinical work that follows will convey some of the spirit of our transpersonal
psychoanalytic therapeutic relationship, anchored in the divine relationality between us.

What follows is a window into my relationship to spirit and the spirit within my patient, which my patient could, unconsciously, come to regard and resource. My patient, above all else, was seeking certainty, and she was even willing to reject marriage to anchor the imagined certainty that the marriage wouldn't succeed. She was pulling me into a confrontation with that ultimately untenable drive for certainty in marriage, to support her becoming.

This drive in my patient, for a certainty that would attenuate risk, further catalyzed and deepened my own inquiry into the nature of commitment in marriage. If commitment was not to be a guaranteed drive for certainty, what was the nature and purpose of commitment in marriage, I queried?

The internal response cultivated by this inquiry has been both surprising and quite paradoxical. It has been surprising in the sense that a resolution settling the debate of marriage being fated for success or failure has proven to be ever elusive. Instead, what has appeared on the horizon of genuine inquiry is an appreciation for the dual movement of deepening commitment on the one hand, to giving all one can to the path of emergent love, and an equal and seemingly opposite, yet perhaps complementary, deepening regard for the genuine uncertainty of the outcome of marriage on the other hand. Commitment does not attenuate risk; commitment partners risk.

The more I have looked into the nature of my own evolving nuptial commitment to my partner, a study that my work with my patient necessitated and even demanded, the more I am made aware that my growing nuptial commitment is a ballast for but not a solution to the unknown marital territory that lies ahead.

In terms of my patient’s work ahead, about nine months prior to her wedding, and shortly after she became engaged, we identified that the voice of shame was looming large within her. At the patient’s request, we added a second session a week, for multiple weeks at a time, during this intensely difficult period. The voice of shame was experienced somatically as a kind of withdrawal within herself, a pulling away from her beloved, a shutting down and a closing off. And as the work progressed over the following months and the voice of shame became more threatening to her wedding plans, this somatic reverie intensified to become an isolation from others.

**Projective Identification**

When given expression, the voice of shame could be quite cruel in its judgement of my patient’s suitability for marriage. By a turn of what I assessed to be projective identification, negatively charged aspects of identity were swept away from The Self (my patient) by projecting them onto the other (her fiancé), who then carried these negative aspects by a hat trick of shifting identification. My patient felt negatively toward and judgmental of her fiancé and fearful of becoming “stuck” with someone who she saw as isolated, internal, and disconnected. I, at first gently but increasingly firmly and explicitly, suggested that these were qualities within herself that she judged harshly, which she cast entirely onto her fiancé, disowning these qualities in the process. She accepted this interpretation nondefensively, suggesting that there was some merit to the interpretation.

The most troubling aspect of this projective identification was that she viewed her fiancé as being the wrong mate. Her unbearable core feeling of “being wrong” was mapped onto her fiancé in a psychic effort to rid herself of this core feeling and yet also, paradoxically, to be linked to the working through of this core judgement. This played out in a fantasy that I, as her therapist, would judge her as wrong to get married and that I had, in fact, harbored this judgment about her being “wrong” “all along.” In this way, my patient was projectively identified with what she imagined to be my superego but what was actually evidence of her condemning superego at work. The voice of shame was quite relentless. Why, it reasoned, would anyone wish to love her, to marry her? Surely that person (her fiancé) was defective. As the work progressed, the voice of shame was related to in the first, second, and third person, and we explored the somatic and psychic dimensions at length.

**Dreamtending the Council of Self**

Having given the voice of shame its space and time for expression and exploration, what we came to appreciate was the equal need to reign in the voice of shame so that other voices could be
heard in the council of Self. Forging such a council is a central Dreamtending practice. With this turn in the work, in terms of clinical interventions and clinical decision making, Aizenstat’s (2006, 2011) dream council figured in the transpersonal psychoanalytic psychotherapy. I began to observe ways in which the voice of shame crowded out other voices and began to direct our attention to curiosity about these underattended images and their voices. In this way my patient observed that the voice of shame was like a poisonous apple. When asked who else had a perspective on her relationship, my patient came to perceive a “woman of vision.” She noted that this woman represented “an openness” and “a true connection” in her relationship. Following this visionary thread, she also noticed a “golden goose” that represented her relationship. Each of these figures were important and distinct dream images, I suggested, in her council of Self who deserved to be heard and to share their voices, their perspectives, about her relationship. The protector, I observed, can make a place for hearing from a wider council so the love of relationship doesn’t get cast aside under the weight and judgment of shame. Following this direction, through the Dreamtending practice of welcoming a circle of dream image presences for consultation, we began to forge a council on relationship that went beyond the dominance of the hyper-critical voice of shame.

It was this woman of vision who I lent my ego strength to in the therapeutic work, in guiding my patient to help her quiet the voice of shame, to calm and connect with the child within her (see dream image below), and to amplify my patient’s link to the golden goose. And this support for the reorganization of her inner council was helped by my own decidedly different, yet also in some ways not totally dissimilar life work of creating psychic space for a marital union, in reckoning with my own shadow and thus making room for a conscious embrace of intimate relationship in my own circle of being and my own path of love’s healing presence.

**Dreaming the Cave**

During this same period, about nine months prior to the wedding, the patient had a dream that we worked with extensively. The dream image was of the patient being sealed off in a cave; this image became a recurrent theme in our work. The patient associated to this image as getting stuck inside of herself, with no way out. It was a disturbing image for the dreamer, causing great distress and angst. At this point in the psychotherapy, we stayed in the realm of associations to the dream. She associated to fear of being “stuck” in her marital relationship. We did not venture into the further reaches of Dreamtending, which include dream amplification, dream animation, and dream action (Aizenstat, 2006). The patient’s level of distress precluded these more creative Dreamtending interventions at that time, by this clinician’s assessment. But now, as these new images in the council of Self were coming forward, dream image amplification and dream image animation and action seemed to have more room for psychic play wherein dream images could be imagined further and come alive between us. In terms of transpersonal psychoanalytic clinical decision making, I then guided us in that direction, listening to and following the direction that the work was asking of us.

**Creative Storytelling**

From the perspective that we are dreaming all the time, day and night, and from the perspective that our very thinking is a kind of dreaming (Pearson, 2021), I guided us to explore in terms of transpersonal psychoanalytic intervention the images that were now arising through creative storytelling. I did not know if my patient would be receptive to creative writing as a method for dialoguing further with these voices and animating these living images. Yet I wanted to offer it as a possible intervention, if she was inclined to take it up, to speak to and foreground her creative and intuitive self that was being consistently crowded out by the hyper-critical voice of shame. As Einstein said (https://www.inspiringquotes.us/author/3804-albert-einstein/about-consciousness), the level of consciousness needs to change to solve a problem created at a prior level of consciousness. Applying this principle, the critical mind in isolation could not answer if my patient should marry. She needed a council of voices to consult, drawn from other dimensions of her being—deeper aspects of

Transpersonal Psychoanalytic Psychotherapy
herself—who held different levels of consciousness on the question of relationship.

As faith would have it, she responded with a beautifully crafted story the very next session. It was left unfinished, and we explored in the next sessions different paths that the story might take. We played with different narratives, as we animated the new images that came directly from the story. In the process of writing the story, a hummingbird appeared in her imagination, a spirit bird of love and connection. The poisonous apple spontaneously transformed into a hummingbird and brought a spirit of benevolence and of play to the dreamer, transforming the previous feeling of foreboding that was associated with the threatening and malevolent poisonous apple.

In this way, the creative writing intervention was, at root, an intervention to support the council of images, through amplification and animation of these daytime dream images through the creation of a children’s story. My patient was desirous yet also fearful of having children—she had planned with her fiancé to have children once they got married—and I felt that a children’s story would allow her to approach the parenting self within her and dialogue with the archetypal child—a constellation of the child within her and the child yet to become and emerge.

What follows over the next few pages is a condensed version of the story that emerged, in fragments, over many weeks. The story is a combination of my patient’s writing between sessions and its elaboration through our creative synthesis of Voice Dialogue and Dreamtending across multiple sessions. Essentially, my patient would bring a piece of writing and those images in the narrative would give rise to my questions in the form of Voice Dialogue and Dreamtending, questions such as what would she or he say and how would they/it respond? Our exchange would then further the story.

For instance, when the image of the child appeared, this is the exchange that emerged in session:

**Therapist:** The child is hiding in the cave?
**Patient:** Yes. She is all alone.
**T:** I invite you to speak from the first person as the child, to give her expression …
to call the hummingbird to her aide on the other. I reflected these observations to my patient, paving the way for more exploration and elaboration.

The appearance of the hummingbird gave her the heart she needed to make direct contact with the lonely child in the cave who was sealed off from others. This child was asocial and retreating “within the within” to seek refuge. She had gone so far inside of herself that she had stopped eating and drinking and sleeping. And she had gone mute. When the hummingbird appeared inside the cave, the child felt a shiver of hope run through her. By some feat of magic, through the therapeutic work of seeing and being seen, the malevolent poisonous apple had transformed into a benevolent hummingbird. Slowly over days and weeks, brightened by her new companion, the child allowed herself to make sounds, as the hummingbird could hear her. The hummingbird hovered nearby, extending the soothing music of her wings in flight, accompanying the child as her emergent sounds gradually elongated into vocalizations from the depths. The sounds were guttural groans and growls, aching cries, and rageful screams. Yet the hummingbird did not fly away; she held steady vigil as the child gave voice, across days and weeks, to her inner world of feeling and emotion.

And then one day, after a torrential rainfall, the seal of the cave came undone, and the child knew it was time for her to emerge and reenter society. With the hummingbird as her guide, they traveled many miles to a place that the child could, in time, call home. As she entered the welcome dwelling, now ready to eat and drink and sleep and talk, she placed the poisonous apple on the altar, as a remembrance of the journey she had taken and survived. She also placed on the altar two feathers from the golden goose of relationship in recognition of the companionship she shared with her fiancé and the magic that companionship contained. The altar was visited by the hummingbird who recognized the child of wonder, alongside the child of rage, anguish, and despair, and loved them both. And the woman of vision recognized this cast of characters, this constellation of dream images—the child of rage, anguish, and despair; the child of wonder; the poisonous apple; the golden goose; and the hummingbird—as vital members of her wise dream council on relationship. Vital to transpersonal psychoanalytic skill, none of them were left out. None of them were abandoned or banished or condemned.

**Woman of Vision**

In this way, the woman of vision learned that the realm of the underworld—the realm of the cave and the poisonous apple—and the realm of the overworld—the realm of the hummingbird and the golden goose—were not separate. Slowly the woman of vision learned that her dream council provided access to both realms as well as to the mediating realm of this middle world. Sitting in front of her altar, a tribute to all three realms (the underworld, the overworld, and the middle world), she began to call upon the voices of the council to recognize and to celebrate her relationship. In this way the woman of vision began to learn more from the golden goose.

**The Golden Goose/Golden Locket**

The dream image of the golden goose was enshrined in a real locket that her beloved had given to her as a symbol of their love. The locket was golden and linked the lover to her beloved whenever she thought of it or wore it around her neck. In this way, the dream image of the golden goose was acted upon (Aizenstat, 2006) and ushered into the middle world with traces of its feathers from the overworld. The locket was the dream image of the golden goose made visible and tangible. The locket was a transitional object (Winnicott, 1986) and a symbol of the golden goose, yet the locket was also just itself.

The locket opened into two sides of one heart. In this way, it contained the truth of relationship, the
truth of oneness and of twoness bound together in a single object. Accepting the wearing of the locket was an act of receiving her beloved, allowing her fiancé to adorn her with love. The golden goose was sacred, as was the locket. The golden goose is prized for its capacity to create precious golden eggs—beacons of the sacred that are born from within the sacred heart of relationship. As the woman of vision sat in front of her altar, wearing her heart locket, she began to dream a dream of the golden eggs—not knowing what they would become but recognizing that they were a testament to the loving union of her upcoming marriage and its creative potential.

This was an act of faith that the child of rage, anguish, and despair could not imagine. This was an act of faith that the voice of shame could otherwise drown out and eclipse. The faith involved was something that only the dream council could fathom, through the eyes of the woman of vision, for she beheld the overworld in the same gaze as she beheld the underworld and the middle world. This regard for the whole universe, undivided, restored her to faith in relationship. Only by registering the real malevolence of the poisonous apple could the woman of vision appreciate the containment and abeyance of its toxicity. Only by knowing the depths of the underworld, the true terror of the solitary cave-dwelling existence where eating, drinking, and sleeping were suspended and inaccessible, could the woman of vision appreciate the simple pleasures of the rhythmicity of life and elemental human connection.

This act of faith in the realm of the golden eggs, now beheld by the woman of vision at her altar in the company of her dream council, was not divorced from a regard for the underworld, for the golden eggs would be incubated according to the translucent darkness—not an opaque darkness that was harmful but a translucent darkness where, not unlike the hummingbird in the cave, light could enter.

All of this psychic material, this journey through the underworld, the overworld, and the middle world, came through my patient’s creative storytelling, which called upon character development through first, second-, and third-person Voice Dialogue and the tending of each dream image through association, amplification, animation, and action (Aizenstat, 2006). The creative synthesis of these interventions, threaded seamlessly together, allowed for the story to evolve and be told. And it was the threading and the telling of the story that was so important to my patient’s personal growth and spiritual development. As can be heard in the story itself, it is a heroine’s journey, not drawn from myth, but from lived experience. What my patient came to appreciate in our work together, through our unfolding of the dream imagery in Voice Dialogue and story, was that she had been initiated into the realm of vision that now contained (and did not dismiss) her harrowing experience, symbolized by the cave and the poisonous apple. This was the way to the altar—the wedding altar, the spiritual altar, and the dream council of alter aspects of her Self.

The unfolding and threading and the telling of the story, preceded by months of Voice Dialogue with the voice of shame and the telling of the dream of the cave with the merest of associations to it, gradually allowed my patient to shift from terror about her wedding and fear of marrying the wrong person to excitement about her wedding and embrace of her beloved through an embrace of her inner voices and dream images. There were many points along that way that were difficult not only for her but also for me as her therapist.

**Faith in “O”**

I too had to summon great faith in the work, in the unfolding of the story, in the wisdom of the Voice Dialogue, and in the capacity of the dream council to lead the way. I did not know in which direction the process would lead. I had to rely on faith in “O” as the psychoanalytic attitude, as Bion advanced (Eigen, 2011), with faith as the guiding frame. I did not know for sure whether it would lead my patient to the wedding altar or away from it; I placed my faith in the sense that the alter aspects of Self that we were forging through the dream council would lead her where she needed to go. As much as she wanted me to tell her that her relationship was “wrong” and that her fiancé was “the wrong person” for her to marry, I did not succumb to the pull of this projective identification with enacted introjection. I did not play out the role of her cruel superego.
Rather, I witnessed these psychodynamics at play and allowed them to inform my questions for her about the dream characters: How did the apple slowly poison her? How did the cave look, how did it feel? Was it a place of refuge as well as torment? In what ways? What did the apple have to say to her? What did the cave want from her? Why was it so austere? How did the hummingbird find her? What allowed the hummingbird to contact her? What allowed her to know the overworld of the golden goose here in the middle world? What was the relationship between the child of rage, anguish, and despair and the child of wonder? These were the kinds of questions in session, in terms of transpersonal psychoanalytic technique, that I asked, and we then explored together, which contributed to unfolding the fragments of the story that you have read, which my patient then reflected on and composed between sessions across several weeks prior to her wedding.

Transformations in "O"

The voice of shame was still there. My patient did not dissolve the voice of shame. So what changed? What allowed the voice of shame to be subdued? My patient was able to make space for other voices within her to be heard and for the dream council to have her ear and for the voice of shame to have a place in this council of Self. In this sense, in terms of a transpersonal psychoanalytic treatment plan, this work was not one of psychic integration per se as much as it was about accessing divergent parts of her Self (the woman of vision, the golden goose, the child of wonder, the hummingbird, the altar itself), including her shadow aspects (the voice of shame, the poisonous apple, the cave, the child of rage and anguish and despair) and allowing them to know one another more intimately, ultimately organized, not by a tyrannical superego (the voice of shame), but by a creative ego (the woman of vision).

What also changed was that my patient was slowly absorbing and metabolizing her own projective identifications, which had previously been—as experienced from the perspective of countertransference—cruelly cast upon her fiancé. She no longer attacked her fiancé as the isolated, internal, and disconnected one, as she gradually came to relate to these aspects of her own character through the images of the child of rage, anguish, and despair and the cave. The more she was able to amplify and animate these dream images, the less her fiancé needed to stand in as a punching bag for these disavowed qualities within her through her relentless judgment and criticism. In this way her fiancé was free to have his own streaks of isolation, inwardness, and disconnection; these qualities were no longer such a deadly threat to my patient's self image.

Not only that, but the image of the golden goose allowed her to rediscover and build relationship with the divinity within her fiancé as well as within herself. Wearing the heart locket, she meditated on her fiancé's majesty and magic. And through this dream portal, she was able to behold the grace and mercy, kindness and playfulness, creativity and intelligence that he embodied. The light of the golden goose amplified her fiancé's spiritual nature in a way that she could take into her vision without being blinded. In this way, her true love for her fiancé was no longer shrouded by the voice of shame. He was restored, by the woman of vision, as the right person for her. And in that restoration, she was re-membered as the right person for him.

In this way, she was no longer the unlovable castaway of the cave. Rather, she was a woman of vision who harbored within her a child of rage and anguish and despair who felt she was beyond love, alongside a child of wonder and a hummingbird and a golden goose. The child of rage and anguish and despair was not banished. The child was not shamed for feeling shame. The child was accepted as an important voice in the dream council, in dialogue with other voices and mediated by the woman of vision. The woman of vision showed the child compassion and gave her a sense of home at the altar.

My experience is that when the work is in the direction of personal growth and spiritual development for the patient, it is also ultimately so for the therapist. What made this work so enriching for me was not, perhaps surprisingly, that my patient decided to get married. Although I was delighted for this eventual outcome, what made this work so enriching for me was the
transformation through "O" (Eshel, 2019), by which I mean the transformation through the unknown and unknowable, the surrender to faith in "O." Through this work, in terms of a transpersonal psychoanalytic case conceptualization, I had to go beyond a “should she or shouldn’t she get married” dichotomy, both within the patient and within myself, thinking about the patient’s path, to place my faith in the truth of her soul’s choice, regardless of outcome. In terms of a transpersonal psychoanalytic therapeutic goal, I helped her to clear away the psychic noise of the deafening voice of shame so she could hear her own soul more clearly through the amplification of the dream council, which allowed for this transformation through "O." And, in terms of a transpersonal psychoanalytic therapeutic outcome, it was the process of surrender to this unknown, unknowable truth—and our battle to hear it—that was so meaningful to me.

One can never know the outcome of a marriage, but one can have faith in it. This level of understanding, brought about through the transpersonal psychoanalytic psychotherapy with my client, was illuminating for me personally as well as professionally. I came to understand, directly through my own surrender to a transformation in "O" guided by the work with my patient, that there is no guarantee of or surety in a “happily ever after,” only a faith in making the journey of marital union wherever it leads.

The process of this transpersonal psychoanalytic psychotherapy paralleled its outcome. That is to say that the questions of faith and the questions of ultimate meaning that the therapy addressed itself to, through a creative synthesis of Voice Dialogue and Dreamtending and guided by a sense of divine relationality, were not only the main arteries running through the body of our work together but also the heartbeat of the work’s rhythm. The regard for the spiritual nature of the unknown, unknowable mystery of life and the regard for the un/conscious dynamics of the psyche that characterized our work engendered these very perspectives in turn. This path to the altar fostered an expansive sense of Self, now organized by the woman of vision, to claim the myriad of voices within her and the emergent dreams that now continue to lead the way.

### Endnotes

1. Significant identifying information has been changed in order to protect patient confidentiality. The clinical vignette is a composite of case material wherein the fictionalized case speaks to clinical dynamics.
2. Both Voice Dialogue and Dreamtending are akin to foundational Gestalt principles of drawing forth an aspect of self and externalizing dialogue with that part, or character.
3. Post Bionian Field Theory, which Antonio Ferro and Giuseppe Civitarese are known for, is called and theorized as “bipersonal.” I view this work as transpersonal in that it includes and also transcends the bipersonal field.
4. “The Self” is substituted here, for the purposes of this article, for the patient’s first name, which was used in session.
5. From the perspective of a transpersonal psychoanalytic psychotherapy, I have formulated a living psychoanalytic koan that asks, fourfold: What’s mine? What’s yours? What’s ours? What is? From the perspective of “What’s ours,” this level of consciousness is both intersubjective, relational, and also represents an at one ment (Eshel, 2019), an indivisible union. Although we can certainly speak of a consciousness that is variously mine, yours, ours, and that simply is, as I am doing here in invoking projective identification, it is understood that these interrelated perspectives all animate the transpersonal analytic field of play and work.
6. We did not explore this image mythically but rather through amplification and animation, as Aizenstat suggests, to stay close to the patient’s living image.
7. This creative writing intervention of writing a children’s story is one I have employed previously with men who wish to become fathers and are approaching fatherhood. It is an intervention that can also be used, as it was here, with women who wish to be mothers as well with those who are approaching motherhood. A purpose, alongside writing the story for its own sake, is to activate and mobilize the parental mentor through story writing and storytelling.
References


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Willow Pearson Trimbach, PsyD, LMFT, MT-BC, is Associate Professor and Director of Clinical Training, Clinical Psychology Department, California Institute of Integral Studies. She teaches professional seminars to clinicians in training, transpersonal psychotherapy, and the unconscious as personal and social process. A licensed clinical psychologist, licensed marriage and family therapist, and nationally board-certified music therapist, Dr. Pearson has a private practice in Oakland, California, where she provides psychoanalytic psychotherapy to adults, and she supervises clinicians. Her specialty is dreamwork—helping people to access, interpret, and be in conversation with their dreams. Dr. Pearson is also a singer and composer. She has five albums of original music and a sixth album of Tibetan Buddhist songs of realization. Dr. Pearson is co-editor and contributing author of The Spiritual Psyche in Psychotherapy: Mysticism, Intersubjectivity and Psychoanalysis, published by Routledge in 2021.

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