And, uh, we're really looking forward

to today's conversation with Veronica Cast

and, um, she's going to introduce herself

and share a little bit more.

Um, but again, if you have any questions,

feel free to put it in chat.

And we'll also have time at the end to do some questions.

And so you'll be able to share anything at that point.

If you don't mind, if you can put yourself on mute just so

that we can make sure that, um, the conversation,

everyone can hear the conversation going

on, that would be great as well.

Okay. Hi everybody. My name is Verina Cast Verina.

I am sitting here in San Kaen.

San Kaen is a little town between the mountains

and the lake of Constance, 80,000 inhabitants

and the big, big university, and a big medieval library.

I am a union analyst. I did my exam in 1,970.

I am a psychologist

and I was a professor

for psychology at the University of Zurich.

And since 1,973,

I'm giving lectures at the universities

and at the CG Institute.

Uh, I have written some books,

and I'm happy to spend these two hours with you.

I think the first hour, perhaps a little bit more will be,

I will talk, I will give a talk afterwards.

We can, we can have a discussion.

But even in this talk, it is a lot about practical work.

But I would suggest that we don't do, uh,

discussions during my presentation.

We do it in the, in the, in the second part,

or if I encourage you to do it,

because I don't have a feeling for you now,

but perhaps I get one.

During my talk, I was asked to talk about dreams

and imaginations in clinical practice.

And even if I have to talk about clinical practice, I have

to give you some theory.

But first of all, I would like to try

to with you the channels of imagination.

Uh, I want to rush you through the channels

of perception that are also the channels of imagination,

because the, the, the next two hours,

it's all about imagination.

Psychotherapy is all about imagination.

You couldn't do psychotherapy without imagination.

So I would like you, I would encourage you to close the eyes

or to steer at one point before you

and do some deep breathing.

It'll be much too fast, but I'm doing it.

But I only want to give you an idea.

What are the cha what the channels of imagination are?

Imagine you are working through a street.

What do you see?

You smell the smell of a bakery. You

follow the smell to the bakery,

and you get something to taste.

We leave. Now the bakery, you pet the cat.

And if you don't like cats, something soft, you like to pet,

you hear the beginning of a piece of music that pleases you,

you imagine you make a movement

with the whole body, which you like.

If you want to dance in the imagination, dance.

If you want to swim, swim. If you want to ski, ski

leave.

Now these experiences, please hold the eyes closed.

You memorize the images you had

and the connected emotions,

the images, I repeat.

We have been walking through a street. What did you see?

Then? You smelled the smell of a bakery.

You went into the bakery, got something to taste.

How was it? How was the emotion connected?

Then you pet the cat

or something you like to pet.

You hear the beginning of a piece of music that places you

and you imagine a whole body

movement, which you like.

If you want to dance, you dance.

And if you want to swim

or swim, now

you can please open the eyes,

do some joing, some stretching.

I did this exercise because it is clear for us.

Imagination means to see, we stay in the eye

to listen, we stay in the ear.

But not only this, it is also to to have a mo movement

with the whole body.

Emo there is emotion connected,

and that means the emotion is in the body.

And when we can address the emotion,

when we can name the emotion, then it is a kind of feeling.

And imagination is alive

and close to emotions when we have all the modalities on,

on our disposal.

So the channels of imaginations are also the

channels of perception.

Perception. And if people say, I'm so bad in imagination,

what actually is usually not the case,

but then they have to go into the world

and they have to, they have to use the senses.

They have, they have to get in contact with the senses.

This is imagination.

When we are talking about active imagination, uh,

and I will not talk today about, uh, active imagination of

this is a very specific imagination

where there is a dialogue between two aspects.

But I can tell,

I can tell you imagination is much broader than this

specific kind of active imagination.

Now, we have, we are talking about dreams,

and we have two dream theories in the union.

Psychology. The one is that complexes core dreams

and com dreams put complexes into context.

They process complexes. This is the summary in a way.

And we have the theory of compensation.

This is perhaps what, you know, more dreams,

compensate conscious attitude.

The understanding of dreams is very interesting in you

because most people think it is about in doing

interpretation of dreams, understanding of dreams.

But this is not necessarily the case I give you here.

Uh, quotation, I really like Ung says,

in the majority of my cases, the resources

of the conscious mind are exhausted as a,

we don't know what to do.

We have tried, we have thought about,

but maybe come to an end.

And now in such cases,

my attention is directed to dreams.

These at least present us with images pointing to something

or other, and that is better than nothing.

That's imagination. The dream.

The dreams gives us images.

And with these images we can work. This is on volume 16.

And the second part is, I know

that if we meditate a dream sufficiently long

and thoroughly, if we carry it around with us

and turn it over and over,

something almost always comes of it.

This something shows the patient

what the unconscious is aiming at.

The result means something to the patient

and sets his life in motion.

Again. So young things, people who are coming to us,

they, they, their life got stuck.

They are in a standstill in a way.

And all the conscious attitudes,

all the conscious efforts do not help.

And so he says, then I'm, then I'm regarding the dreams.

And now here to, for me, very important points.

If we meditate a dream sufficiently long

and thoroughly, not if we do an interpretation,

if we meditate, if we carry it around with us

and turn it over and over, something almost comes of it.

And what this is, what comes out of it

sets the life of the patient in motion.

Again, this is very often not one case, the one dream.

They can be different dreams.

But this is why yu estimates the dream so much

and why I think we should be very careful

about talking about dream interpretation.

We should much, much more talk about,

we should much more talk about meditating a dream.

Imagining a dream.

I show it to you, carrying a dream with us.

And most of us who are living with dreams,

we do it when the dream is very difficult,

but sometimes we should also do it when the dream is easy.

Now, the first dream in, uh,

theory is complex trigger dreams, uses the re

to the unconscious is not the dream what Freud said,

but the complex, which is the architect

of dreams and symptoms.

This is a little bit sophisticated.

He, you must say I'm different,

but there is a, an important notion that in the dream

we, we can find complexes

and even more clear, he says,

the complexes are the actors in our dreams.

I say this because during all my teaching,

I have found out that people are really good in comp in the

theory, in the compensation theory.

They say, oh yeah, the dream is compensating.

And uh, and that's fine.

And the dream is bringing, uh, what I need.

And this, the, the theory

that the complexes are the actors in our dreams is

very much neglected.

And it is neglected

because it's not so nice like the compensation,

it's much more work.

So the complexes are the actors in our dreams,

and there is a connection with the effects.

Sure, complexes has an effect.

The effect cause complexes

and the complexes influence effects, you know,

the association tests CGO made.

And there he found out if there is an effective problem,

then you can find a complex.

And if you are talking about complexes,

this has an in influence on the effect.

And what was important in the association test is, uh,

the self-control is not possible if you have a complex,

because then the complex takes over.

We'll come to a, to to, to a to an example.

The purposefulness is replaced by unintentional areas.

Perhaps some of you have an authority complex

and have done some exams,

and you have been in quite in a good shape.

You have learned, you, you found that you are great.

And then you are coming in the room

where your professor is sitting

and you have the idea, oh, I have forgotten everything.

I don't know anything.

You feel like a little boy or a little girl.

This is the complex takes over.

Uh, and, and perhaps you have worked on this complex,

and so you can say to yourself, wait a minute, that is

what hap is happening now.

But I have 24 years, I, I have studied, I'm quite okay.

And then you, you can start or you are full of anxiety

and you, you, you do not, you, you are not in a good shape.

So that means the self-control surface in proportion

to the strength of the complex.

What is important is, uh, in

we are talking about com, the collective work.

Number three, these, these are the first books

has written 1906 6.

And I think this is

for me the most important quotation we have

in junction psychology.

The essential basis

of our personality is effectivity 1,906.

That was extraordinary.

Now it is not because we have effective neuroscience

since 2000.

And nowadays everyone says, sure, the essential basis

of our personalities effectivity, but it is also our body.

And effectivity, uh, it means

sentiment, emotion, affect, uh,

and this term effectivity was proposed by er

Loyal was at the ley.

The boss of CGU

and Boyer was very much interested in the association test

because he thought that you can prove

with the association test that the essential basis

of the personalities affectivity and effectively did it.

And this quotation is great thought

and action are as it were, only symptoms of effectivity.

Now, when do we get the co complex?

We have here a quotation.

The complexes are called force.

Whenever the individual has a painful

or a significant encounter missing out the event

or demand in their environment, which overwhelms them

or which they do not have the capacity to deal with.

And then after the zoom is talking about parental complexes

Since the seventies, we have the episodic memory.

Before there no one knew us anything about the episodic me

memory, Talvin has developed the episodic memory in 1,970.

And so I think we can talk about the complex episode when we

say it is a demand of another, I can't respond.

I think there could be a mother or there could be a father,

and there is a emotion.

And the, and the problem is, uh, you,

you can't respond to a demand.

That means there would be bonding would be necessary,

but there is no bonding.

It is just a demand.

And we think that the, the epi, the, the complex episode

is internalized as a whole.

I give you now the example of shame.

For example, you as a child,

you see a child and you see an adult.

You as a child, you have done something.

You would, you would like to be admired by a father

or a mother, but you meet the critical eye,

you meet the very critical eye of, of the parent

or could also be a teacher or or a sibling.

And you feel ashamed.

And when you feel ashamed, your self-esteem is ized.

So you, you are, you lose your

c confidence.

So you can have such a shame complex. What does this mean?

It means if people are looking at you,

perhaps only with a question in the face, then you think,

oh, I'm criticized.

These people do not think that I'm good enough.

And then it is possible

that your self-esteem is perver again.

And out of this you have reactions.

You can become depressed

or you can try to become hyper, hyper perfect.

Hyper perfect means you, you, you don't show

that you have any problems.

Everything has to be perfect, perfect, perfect, perfect.

And uh, when you try to be hyper perfect the whole time,

then you get the burnout

because no one in the world can be so perfect

or you try to hide, you try to hide what you have done,

or you have an open angry reaction.

This would be a shame complex.

And now when I say it's an episode, then I mean,

when you are talking to yourself,

you are talking in the same critical way as the one

who sets the complex did talk to you.

You should, you always do your,

and it, it it is always about shadow,

but you can also be identified with the shaming part.

And people who have had,

had the shame complex are very good in shaming other people.

They do not. They, they perhaps they are very critical.

This is po this is possible, or,

or they can give you the idea that

what you are doing is not really very good

with what they are doing.

This is outstanding or they are just questioning you.

Are you able to do it? Are you really able to do it?

Do you think there is that you are up to it.

So that means this complex episode is something you

have internalized in your self talks,

but you can be identified, you can be also you,

you can criticize other people.

You can also be identified with the child

whose self-esteem is crumbling.

These people, uh, are very much on in the, in the

victim position.

In the victim position.

This is a complex episode and on,

and this is what is, uh, in, in the analytical relationship.

You can project the critical eye to the analyst

and you can also project the, the, the, the child

who is not able to do anything.

So this, we have very much in translate in transference

and counter transference, what is necessary.

Uh, shame has to do

with the critical look.

And French philosopher

has worked a lot about shame.

I think he did the best analysis of the look.

And there is another French philosopher, Levi Venus,

he's a Lithuanian French philosopher.

And he says, yeah, but people do not have only the critical

look, critical look.

They have also the ENT look.

And this is what has to be developed, developed in,

in the analytical process.

I think analysts usually have a warm,

benevolent look,

and they can also encourage patient patients

that they look at themselves a little bit in a more

benevolent way.

I don't want to speak about this value.

I only want to give you an idea what is

a complex episode

and how important such a complex episode is not only

for the dream, you can have this also in the dream.

You can have a dream where someone is looking at you in a,

in, in a very critical way and you are behaving.

And so perhaps in, in there is a dream where you are not

your self-esteem is not crumbling.

You are standing there and you say,

but I am also someone or so.

So if you have, if you see, if you have the, the look,

if you, if you know about complex episodes,

you can easily detect complex episodes in the dreams.

So this is what how we understand the complex episodes,

how complex episodes can be understood as internalized

conflictual relationship experiences with a theme

that is emotionally stressed.

There are generalized conflictual relationships,

experiences in the area of certain needs of the personality

in a situation where a bonding experience would be

needed generalized.

Uh, sometimes you, you develop a complex

because it is traumatic,

but very often it is not traumatic,

but it is always the same.

You can have a father who, uh, is quite a nice father,

but all the time when you are doing something

and you would like to be, uh, admired, then he says,

you have to grow a little bit.

Perhaps one day this will really be good.

And if you hear this all day or you hear this over years

and years, then you understand it

that people like father tell me that I'm not good enough.

It is about being good enough.

What, what, what what we added, I think me

and my colleagues, I think is the idea

that this happens in situations where

a bonding experience would be needed is not

so much talking about bonding, but it is, it hurts so much

because you would have been like to be admired

or even comfort forwarded

because something didn't was not that you have not been up

to really a good situation.

And then you could have, uh, father could say, look,

this time it's not, it's super optimal.

The next time it'll be better or we try together.

So I think this is for me in the moment, the definition

of a complex episode.

That's okay.

Now, complexes trigger dreams.

The leading emotion in the dream points

to a complex and complex

episodes are depicted in the dream and are changed.

And complex episodes can also be represented

in symbolic forms.

Some words about compensation, uh, I don't want

to talk a lot about it,

but just for memory,

we have the more one sided.

The conscious attitude is we will have vivid

dreams with a strongly contrasting,

but purpose of content will appear as an expression

of the self-regulation

And compensation leads to the process

of individuation.

Individuation has two principal aspects

in the first place.

It is an internal and subjective process of integration,

integration of parts I have not seen.

And in the second, it's an equally indecent,

indispensable process of objective relationship.

No, neither can exist without the other.

That's an important point.

Uh, and this objective relationship with the other means.

Also individual process means also separation.

Separation from the parental complexes,

not from the parents, from the parental complexes

and the process of induration.

J says, this process of becoming human

is represented in dreams

and inner images imaginations as the putting together

of many scattered units

and sometimes as the gradual emergence

and clarification, uh, and something that was always there.

I think this is interesting about the individual ocean

process because it is the putting together

of many scatter units.

It means to be be becoming more and more whole.

Now. Now what are the dreams for in the dream?

We have challenges for development.

The quotation, the dream has a value

of positive guiding idea

or a name whose vital meaning would be greatly superior to

that of the momentary constellated conscious contact.

The dream has a value of positive guiding idea,

and the might meaning is superior to the,

to the constellated conscious.

Perhaps this is not true for all dreams,

but it is true for important dreams.

And this is not only you who does this.

Shakta is a American scientist,

psychologist, and he worked a lot about memories.

He's, I think if we are looking about,

uh, books about memory, then we can't avoid shakta.

And Shakta says, given the adaptive priority

of future planning, we find it helpful to think of the brain

as a fundamentally prospective organ that is designed

to use information from the past

and to the present to generate predictions about the future.

And this you can do in the

dream chapter.

Again, many of our fantasies are fear fantasies.

If one did not perceive them, one would be inhibited.

Even, even in fantasies that reach into the future.

Just by facing this fear fantasies,

new perspectives can be experienced.

And we are thinking about the finality of the dream

on CCJ young

because you always ask what is the finality,

what is the dream for?

And here we see the dream.

In the dream, a lot of fan, a lot of memory

systems are connected

and have a tendency to show a way into the future.

We have fear dreams,

and now we know these are new research

that the neural correlates are the same for fear in dreams

and fear in, and the conclusion is there is a connection

between the emotions we have in dreams

and when we are awake.

So we simulate fear inducing situation in dreams

so we can react better when we are awake.

So dreams are as training for future reactions

and possibly preparation for difficult situations in life.

This is quite a new study from Lambo

ro from the University of Geneva.

I think that's, that's quite interesting

that there had seen,

if you can accept the fear in the dream, then, uh,

or the, the, the dream is processing fear, then you can,

you can live better with fear in the way situation.

Now let's, let me talk about imagination.

Imagination is the creative, the reproductive

that is memory or creative, that is planning

activity of the mind in general.

It is not a special faculty

since it can come into play in all the basic forms

of psychic activity.

Fantasy as imaginative activity is simply the direct

expression of psychic life, of psychic energy,

which cannot appear in consciousness except in the form

of images or content.

So imagination for C for CGU is not a special,

uh, fact activity.

Fantasy as imaginative activity

is the direct expression of psychic life,

uh, terminology.

So from fantasy, we are speaking of all the ideas

that just come to our mind.

And imaginative activity would mean we are, we try

to be conscious about these fantasies.

Fantasies. We, we get the contact to it

and psychic energy for you,

it is cannot appear in consciousness except in the form

of images or contents

or to fantasize

as an imaginative activity is identical with the sequence

of the psychic energetic processes.

So we have this ongoing emotional processes

and these ongoing emotional processes are, uh,

are, are shown in imaginations, in images.

And perhaps you know this quite good

y when he says in how it is, uh,

to the extent that I managed

to translate the emotions into images, that is to say,

to find the images which were concealed in the emotions.

I was inwardly calmed and reassured.

Had I left those images hidden in the emotions,

I might have been thrown to pieces by them.

This is a quotation, I think all of you know it,

it is from memory, dreams, reflections.

And John is talking about his,

his difficulties in two in 1,912 when he has his,

his his conflicts when he has his crisis.

And for him it also important that to translate

emotions into images.

And this is, uh, I I think all the theoretical, uh,

all the practical skill we use in union psychology have

to do to translate emotions into images.

It is imaginations.

You can feel bad in your stomach,

you can concentrate on your stomach,

and then you can get an image or you can get the feeling

or you can paint it

or you can make up this as wounded with all this,

with all the red book.

But if you are not so artistically gifted

as you also, it's not necessary.

You can do it by yourself, you can write it and so on.

But this is the basis for our

practical work,

the translation into the emotions, into images.

This is not what I wanted

More practical in the, in volume eight,

when Yu is talking about the transcendent faction,

he writes, in a depressed or

otherwise disturbed state of mind,

spontaneous fantasies can arise,

which makes self-regulation possible again.

And in the intensity

of the emotional disturbance itself lies the value,

the energy which he should have at his disposal in order

to remedy the state of reduced adaptation.

Sounds a little bit cryptic,

but what two aspects.

One, even if you are in a disturbed state of mind,

you can have spontaneous fantasies

and these spontaneous fantasies, daydreams.

And so these are important

because they are good for self-regulation.

And when he's talking about the intensity

of the emotional disturbance, that there is the value,

which are the energy

that the patient should have at his disposal to change,

then he means in the energy that is connected with the

complex, the there is the, this energy.

We should be in contact with this amen energy.

And we are in this contact with this energy in talking about

the fantasy and talking about the imagination.

And this is the idea of you that this energy

that is disturbing the person is the same energy

that the person needs to develop.

There is a connection between complexes and symbols.

Complexes develop an imaginative activity,

and now the quotation in sleep

fantasy take the form of dreams.

But in waking life, two, we continue

to dream under the threshold of consciousness, especially

when under the influence of repressed

or other unconscious complexes.

But in waking life, two, we continue

to dream under the threshold of consciousness.

Jung has been talking about this in 1,930

and when the unions have been talking about this, lots

of colleagues of other schools says that this is ridiculous.

This is absolutely not possible.

Now we have since 2000, we have this research

of effective neuro neuroscience, and they say the same.

We are talking about a default network, the default network

that is pon spontaneously active when we have not

to concentrate, when we can rest.

And, uh, all these studies

ha came from a very interesting demand

in some organizations.

People complained that the workers did,

did dream too much during the work

and that they are thinking too much on

things they shouldn't think.

And they asked the neuroscientist, could you stop it?

Could you stop that?

These people start to think about

what they'll eat in the evening

or what they will do at the weekend and so on.

And then they did it

and they found out we have self-generated thoughts

all two, one and a half second or so.

We have a little glimpse in our mind that has nothing to do

with what we, what we are doing.

And now you can't stop that.

You, you, you can, you, you have old,

old people have mobile phones and uh,

and you can, you can ask every five minutes.

What are you thinking of?

Are you say, are you really responding the

mail or are you thinking?

So stop it. And they found out that if this mind wandering,

this fantasies, this little glimpse

or glimpse of ideas, if you stop

that people got extremely stressed.

And so they found out

how important this the food network is.

I will talk a little bit more about,

and the here is the connection to the dream

and to the connection to the quotation I just gave you

that we are dreaming under the threshold

of the consciousness

because in dreaming,

the external sensory inputs are almost entirely blocked.

And so we could see dreaming would say dreaming can be seen

as a intensified version of waking spontaneous thought,

or conversely, that mind wandering

during wakefulness could be seen

as an alternate waking form of dream.

So the idea is consciousness, mind wandering,

activation of the default network

and dreaming, imagination and dreaming.

This is a continuum.

Self-generated thinking.

This consists of uncontrolled forms of cognition,

but comes to our mind like dreaming.

But it is also thought wondering.

Sometimes you are li you are listening to someone

and you feel that your ideas are absolutely in a different

place, but it is also creative thinking,

also an automatic forms of thinking.

And some say,

and this is especially fox, it is also compulsive thinking

or ruminating or brooding.

There is, uh, discussions for the moment because ruminating

or brooding, we are doing this when we are,

when we have a complex.

And actually the self-generated thinking is,

is usually much more free.

So the discussion now is there should be,

maybe we should make a difference,

but I think this is not so important.

So self-generated thoughts, we are not focused.

And then what happens in us?

So it is the terminology, mind wandering,

spontaneous thought, stimulus, independent thought,

daydreaming, creative thinking, rumination,

fantasies, imagination.

There are differences between mind wandering and dreams.

There are similarities, but there are also differences.

The sensory aspect of dreams are far more intense than

during mind wandering.

You remember, you recall when we started, I tried to

bring you in contact with the, the perception with

with the channels of perception.

And this is a body work.

Emotions are in the body and the sensory aspect of dreams.

Dreams are very much embodied.

The potential for these bizarre elements are more intense.

Dreams seem to be temporarily more extended.

Cohesive narratives,

mind wandering are very often only glimpse.

And the idea is that dreaming is a form

of embodied simulate simulation

and is often focused on the relationship

with significant others.

Regrets about the past, worries about anxiety,

arousing future events, uh,

dreaming a form of embodied simulation,

often focused on the relationship with significant others.

Regrets about the past, worries about the future.

So the consequence dreaming can be seen

as a intensified version of waking spontaneous thought.

Or conversely, the mind wandering

during wakefulness could be seen

as a attenuated waking form of training.

Kiri and Fox is a very, very interesting man.

And uh, if you want to, to, to make you a little bit

familiar with this effective neuroscience, start with

him and his colleagues.

Uh, you also can use the name is very good Fox.

You, you, you can, you don't forget the name, Fox.

And he's really a fox.

He's, he's, he's, he's great

and he has great, he has great ideas.

The con the consequences is

we could em emphasize the imaginative character when working

with dreams, working with imaginations on dream symbols.

And when people can remember few dreams,

we could stimulate imagination.

That is one consequence.

And I would like now to show you in a dream

the difference between writing a dream

and telling a dream and imagining a dream.

I'm talking about a dream of a 30-year-old man.

It's half an year before he is coming

after he's half an year in analysis

and he has written his dream.

He has, he's a good dreamer and he writes his dreams.

Uh, I just

read it as he has given it to me.

Traveling by car in a good mood.

You need your imagination.

You know, at some point I reach for the seat next to me.

Sometimes I have chocolate there.

I touch something cold and scaly. I get the terrible fright.

I pull over to the side of the road, I take a close look.

It's a small crocodile, actually quite peaceful.

What should I do? Then it's gone.

I'm worried about the little crocodile.

It's still small, but I don't like the fact

that he on the loose either.

I could be called to account,

but nobody knows that it is my crocodile.

Finally, when I,

I wake up, I'm glad.

It was just a dream I decide to tell my boss about it.

That's an impressive dream.

So this is how he has written it.

He comes to the analysis

and I encourage people to tell me a story

to become fully involved in the dream

and in the images of the dream.

And now you get the same dream

and you can, you can see yourself.

What is the difference?

First he says, I really would like

to know why I have been dreaming about the crocodile.

Crocodiles are not here.

And I say, please tell me the dream again.

I-I-I-I-I ask him to close the eyes

or to steer on point

and just to reengage in the dream

and to describe the images as good as it is possible.

I'm driving my car. I'm in a good mood.

I'm singing to myself

and I'm also dancing a little in my car.

Do you know how that works? It might not.

The dreamer says, well, I'm doing it

with the steering wheel.

I suppose you too goes back to the dream.

I think I I drive home. It's night.

I just remembered you can't dance in a car during the day.

There's too much traffic

or I attract the attention of the police.

Yes, now the crocodile, that was quite surprising.

Imagine I reach onto the next seat next to me

and touch something cold and scaly.

I was very startled, pulled over to the side of the road

and asked myself what I'm doing to do with this beast.

It's still small, not quite that small.

It filled the whole seat, maybe about 80 centimeter long.

It was quite peaceful

and didn't open its mouths like you often see.

But I was a bit uneasy

with such a crocodile alone in the car.

Now, it would have made me feel better if the police had

come round, but of course they don't come now.

I touch it again, very shyly. It didn't bite me.

That takes a lot of courage. He looks at me and I confirm.

He looks at me, he says, that takes a lot of courage.

And then he looks at me, he opens the eye and I confirm

and he repeats.

Yes. So I bravely touch it again, and then it's just gone.

Maybe I don't remember part of the dream either.

Now I was very worried.

You can't just abandon a little crocodile

like that to the world.

It could be run over on the road when the children go

to school in the morning.

I can't imagine what would happen.

And then it would turn out to be my crocodile.

I woke up really unhappy

and I was glad that it was just a dream.

But then I wasn't so unhappy either

because actually it's an exciting dream.

It's really good, isn't it? But I still want to know why.

Dreamed about a crocodile.

So I think you have experienced the difference

between a good written dream.

He even had mentioned the emotions he had.

It is really a correct written dreams.

And the dream when you are, when you are in a, in a,

in a imagination, it is you

reenact the dream in the imagination.

And afterwards, we had talking

or we could say meditate or even a little bit imagination.

He says, I actually really liked the little crocodile.

It has now disappeared, but it'll re reappear.

And then look in my imagination,

the the crocodile is present, present.

And it is gone in the same time.

And I think imagination is something very, very interesting

because it's, it's correct in the imagination.

Something can be present and it can, something can be gone.

And he says it can scare the children.

I ask which children he see.

He, I see three children, two girls

and the boy with their UX laughing together.

Then they see the crocodile just its tail.

The boy sees it and gets scared. The girls make fun of him.

You always see something dangerous.

You have a vivid imagination.

Then the little crocodile appears

and it is no longer so small.

Everyone freaks and calls for help, but no body is there.

And then he says, I have to get out of the fantasy.

It is associated with too much fear.

And I ask, what are you afraid of?

The crocodile could attack me or attack the girls.

I ask, what do these children look like?

They were the way we looked at the time,

not like today's children.

I always went to school with two girls going

to school initially without the crocodile.

I said, I liked he, I like to scare the girls.

And they always insulted me.

I was already a bit of a sport boy and quickly got scared.

They told me I was a s\*\*t task.

I got my revenge by scaring them,

throwing little blanks on the floor.

And I asked, whose crocodile is this?

And he was laughing

and says, oh, it's a little bit my crocodile,

but I would not admit that it is my crocodile.

And we are talking about sitting

in the car and the seat next to him.

I asked him, uh, you said you have a little bit chocolate.

He said, yes, chocolate is nice when you are tired.

And I said, okay, but

besides chocolate, could who could occupy this seed?

And he said, oh, a female friend if I had one,

but I don't have one.

And then we started both to laugh, she said.

And then the new female friend is a little crocodile.

And he said, all the women,

and you look first, they are very small, nice crocodiles.

And then they get bigger and bigger and bigger.

And, uh, and I have really to be careful, uh, we have

to bring, we bring, we have to bring this crocodile to a zoo

because when it is bigger than it, uh, we can't stand.

So now here we, we go, went on.

We have also been talking about the transference

because, um, because because I'm also a woman.

And I, I was also asking him and said, okay,

and when is the moment when I buy it?

But then we go in back

and we, I said, why do you want

to tell the dream to your boss?

And he says, oh, my boss always think that I'm so a

carefree person, but I'm not.

You know, I'm not. So you see this crocodile has a big,

big room of meanings.

And you, you could, you can talk a lot about,

and if you have just, uh, an amplification

and say, it is the Egyptian God taught

and he has to do with life and death.

This is, this is not so interesting.

It is much more interesting if we,

if we are really working on dreams with imagination.

Another very important, uh, aspect of working with,

uh, imagination is, uh, working with imagination

to change, uh, nightmares

or night terrors.

Uh, I have now I have now spoken for an hour.

And it could be, we could open it, we could open

for discussion and afterwards I could give you my example.

My example will take, it's from a practical case.

We'll take 20 minutes, you can decide if I do it

or if you don't do it.

But, uh, do you agree that we now, uh, that, that you,

you ask questions and then, or then I take the time

or do you want me to just give you now the example?

No, please give the case

other questions, other ideas.

Give the example first. Okay.

Okay. There is time for both

and I will stop from time to time

and ask you your impressions.

I think then we have already kind of question and answers.

So nightmares, I mean, by nightmares, I mean dreams

from which one suddenly wakes up,

feel this great fear, even panic.

And this sudden awakening is linked with great agitation

at best, also is a difficulty in orienting oneself.

And there are distinguished from the knight terrors.

The knight terrors are posttraumatic repetitive dreams.

But actually the idea is the same.

Steven Starker suggested already in 1974

to change nightmares by imaginations.

And he proved that also the style of nitris is changed

by working with imaginations.

And this is correct, the style you can change nightmares

by imagination and the style of the night of,

of the dream of the night.

Dreams are changed by imagination.

And this is a method used in union psychologists.

And this is a very important method.

Uh, give you now the clinical example.

A 31-year-old woman seeks therapy.

She feels that she's too anxious, has many different fears.

She has always been ridiculed by her mother

for her anxiousness.

This fears show relatively little in her professional life.

She designs fashion and is very successful.

Visit and fashion is also important

to her for herself.

Her fears show up, for example, in having

fear fantasies that an elevator she is in will crash

many floors down that lightning will strike,

that the avalos will take her away,

that the tsunami will hit her.

She has also jealousy fantasies.

She sees her husband whom she married two years ago,

and whom she loves, how he triggers other women

and spends spent an IC meeting with him, with them.

It turns out that in reality, the two

of them spend practically all their

evening evenings together.

And the patient knows very well

that the fear has no real connection.

Behind this jealousy is a great fear of being abandoned.

This fear is linked to a complex episode

that determines her.

She reacts with life historical overhang. Always.

When we are reacting with complexes, we are reacting

with life historically.

Ang, and this will will be clear, I give you some

hints from her life story.

Her mother and father were both successful in business,

but both were that her words involved

with different drugs.

Her father disappeared when she was four years old.

She had later learned that,

that he had been in rehab several times at the time.

He then also reappeared when she was about six years old.

She had hardly known him

and had hardly been able

to build up a relationship with him.

Either he was working or he was not available there,

but not present, somehow gone.

These are her words there but not present.

He had probably always used drugs of some kind.

She think the manner the mother managed her drug addiction

better, but was often unresponsive.

It had often been scary when she triggered her parents

asking for help and they look through her

with a blank stare.

This is a complex episode. You, you need help.

You are looking for your parents for help.

And there is not the critical look.

For example, it is the, it's it, it's the blank.

Look. It's they look, they don't look at you.

They look through you. They are not there.

The child was just not only not hurt in in situations in

which she needed a reliable relationship person

because she was afraid and felt abundant.

But additionally fear arose from the fact that her parents

were scary to her.

These experiences in terms of life history are likely

to be the basis for the ideas of fear

and the associating feelings of being abundant.

The matter also made fun of the daughter with her fears

made her feel unfit.

Now she has also a shame problem in the first place.

In any case, she did not feel loved.

She had two siblings and the three children.

Patient has an older brother

and the younger sister were very close and tried to give each other the missing nest forms.

They are still linked closely today, together.

We were a survival community.

Did she say there was also a grandmother

who occasionally checked on things.

She lived a little further away.

This grandmother gave stability what she said was true,

but she was also very domineering.

I was glad that she always came once,

but she also well always left.

She liked me very much because I had a lot of energy.

I always thought of something and I drew

and worked a lot with my hands.

This is about her life.

The patient describes her life as n marriage, and she had

and continues to have real nightmares.

She experienced this particularly

eerie when her parents suddenly became such strangers to her

and she could no longer establish normal

contact with them at all.

Here, the crucial complex episode can be identified,

a child turning to parents in a fearful situation,

getting no help, instead being even more at the mercy

of the unkindness and of course,

feeling abandoned as a child.

She dealt with the situation in such a way

that she joined forces with her siblings.

But all three of them felt that they had no, they had

to do everything themselves.

That they should not be dependent on helping adults.

They became apparently all three very independent

and had many anxiety dreams they shared.

Yeah, this complex episode, shame the shape,

the memory and the expectation.

It has always been like this.

I could never rely on anyone

and I will all, it'll always be like this.

Nothing will change this.

The the relationship experiences are stored as episodes

and means that the whole episode can be effective

In the therapeutic situation.

This complex episode showed itself

among other things in the fact that she repeatedly,

you told me her theories about her fears.

Terry tried to banish them by a theory.

I was not allowed to have another theory otherwise.

She felt abundant, left alone with her ideas.

But it had to be clear that she alone knew

what these fears were about.

And if we talked about dreams,

I let her work on them out with imagination.

So she came herself to, in insights,

which I then formulated, adding a new point of which

she then gladly took up.

I perceived her need to be in control of the situation.

That's clear. Someone who has such a lot of anxiety wants

to be in control of the situation,

but still try to interest her in herself.

As a child, I wanted that she was interested in herself

as a child who has been repeatedly abandoned

and those almost mor threatened.

And also to develop empathy.

Now I would like to show you how we worked on a nightmare.

And, um, the following work took place in one hour.

We seen an analytic therapy session

into the 18th therapy hour.

Perhaps about four months

after start, the patient came in a state of dissolution

and said, already under the door,

now I had such a terrible nightmare again,

I would invite you to follow what I'm doing,

also a little bit in a imaginative way,

but don't go too close.

Try to save yourself,

but try to, to, to get an impression.

What is going on the dream.

The dream. You can ima you can have an imagination.

I have a pair of binoculars

and I use them to look into a house that is my house.

If I look through the right class,

I see the different rooms, gray and lifeless.

If I look through the left class,

the rooms are colored.

And I also see people in them, including myself.

But I can't see through both glasses,

with both eyes at the same time.

Left glasses more reciting.

I see myself carrying a

girl on my back.

The girl is clawing at my back. I can feel that now.

And I desperately want to put her on the floor, but I can't.

The more I try, I try the more the girl claws.

It really hurts. I scream at first.

I think it's still a game,

but then I realized that this is serious.

The girl is also getting heavier and heavier.

I can hardly stand upright anymore.

Walking, walking, certainly not.

Is this still a girl at all or some ghost or a demon?

I call for help. No one is there.

And the girl claw and clothes, everything hurts me.

I keep calling for help, help desperate as a child

and wake up to my screaming.

I'm wet with sweat.

Don't know where I am at the moment, looking for the girl

so she doesn't jump on my back again.

And then slowly realize this is another one

of my nightmares.

I'm all out of my mind.

I have a lot of pain in my back.

Do you need a second reading of the dream?

Yes. Okay,

Eric say yes.

And I think sometimes it's really good to

to to hear a dream.

A second time, I have a bear of

binoculars and I use them to look into a house

that is my house.

If I look through the right glass,

I see the different rooms, gray and lifeless.

If I look through the left glass, the rooms are colored.

And I also see people in them, including myself.

But I can't see through both glasses,

with both eyes at the same time.

Left glass is more exciting.

I see myself carrying a girl on my back.

The girl is clawing at my back. I can feel that now.

And I desperately want to put her on the floor, but I can't.

The more I try, the more the girl claws.

It really hurts. I, I scream at first.

I think it's still a game.

But then I realized that this is bitterly imagination.

This is bitterly serious.

The girl is also acting heavier and heavier.

I can hardly stand upright anymore. Walking, certainly not.

It is still a girl at all. Or some goals, a demon.

I call for help. No one is there.

And the girl claws and clothes, everything hurts me.

I keep calling for help desperate as a child

and wake up to my screaming.

I'm wet with sweat.

Don't know where I am at the moment, looking for the girl.

So she doesn't jump on my back again.

And then slowly realize this is another one

of my nightmares.

I'm all out of my mind. I have a lot of pain in my back.

Perhaps you grasp your emotions, your feelings.

You could ask yourself,

how would I feel if I would be the therapist?

You are in a much better situation than I was.

The patient tells the dream in great panic,

much more panic than I could do it.

And this panic is also communicated to me.

I also get tired, and I think that now probably a nook

through the light glass of your dream is appropriate,

which takes out the emotion

because there is such a lot of emotion.

Um, emotional condition is a very important point,

uh, emotional condition.

When no is talking about transference,

he very often is talking about saying

that the patients are infecting us

with their emotions.

But this is one point, uh, it is,

we are also infecting our patients.

There is is is an emotional,

this is is an emotional infection,

is an emotional contagion.

And out of this we can formulate the transference

or the counter transference,

or we can formulate our, our standpoint.

So, uh, this is when you are too distant

to the patient and if you avoid too much the this,

this kind of al emotion, then you are not with an innocent.

If you are too close, you can't help the innocent

because then you both are in a difficult situation.

She says panic streak, that this is now surely again

with the dreams that would occur again and again.

And she repeats a dream sequence.

I see myself carrying a girl on my back

and then I'm involved in the dream.

I experience it physically, even now.

She says, first I see it,

but then I'm involved in the thing.

I experience it physically.

Even now the girl is clawing more and more.

I have great pain. More and more or more and more fear.

I'm so helpless and no help inside.

You are already someone said you, you get tense. Sure.

I, as a therapist, I breath deeply.

This is the way I try to become calm.

I think everyone is doing it.

We are breathing deeply

and for a long, longer time.

And I think I perhaps I did it in a,

a little bit loudly perhaps.

I said, uh, and,

and the patient, she became, she did,

she did the same thing.

And so she had also the, uh, we had been both

in a contagious mood.

So I did some deep breathing

and then she did also some deep breathing

and she did the same as I did.

Whoa. Now

that was an initial calming,

but I really would like to know,

how did you feel when you heard this dream?

Someone did already answer.

Perhaps I could get some more just

anxious.

Overwhelmed. Yes. You, you. Oh, okay. Eric.

I was just gonna put it in the chat.

But, um, well first when you started describing,

um, viewing through the binoculars,

there was the black and white part,

and then there was the other side,

which was the color part more alive.

And to me it suggested viewing through

the left hemisphere

and then viewing through the right hemisphere.

But Eric, uh, please don't do interpretation.

Now the interpretation comes to the end.

It is just how would you feel

as a therapist? Because, because

Oh, okay.

But, but okay. Uh, all right. I'm sorry.

But then it, it, it just took a sudden turn.

Look, look Eric, what you, you have done.

This is what we all do when we are really tense,

when we are scared, when we don't know what to do,

then we do an interpretation and, and sure.

This with two hemispheres Sure.

This, this is, is, was great.

But, uh, to be,

to be, to, to be a good analyst means you have to

grasp the emotion you are in

and you have to regulate the emotion.

Okay. And, and, and,

and it is not just to know what happens.

Yeah. Try to remain calm

or to, to, to, to, to become calm again.

So I have to continue. It takes too much time.

So the dream itself

with its own images, invites us

to look at the dream from a certain distance.

She's outside, but very closely in the same time

with magnification, the binocular.

If one looks on the left side into the binocular,

which just cannot be used as a binocular in the moment,

then everything becomes aligned.

The problem shows itself emotionally

and the right helps you to be without emotion.

And the dream itself

has in itself has suggests how to deal with a great panic.

It is on one hand, look at the panic, feel the panic,

feel it really, and then look from some distance,

take some distance and,

and look at much more in a cognitive way.

And then you go back, and this would be what Eric said,

then you could have the, the connection between the right

and the left hemisphere.

I tell the patient that the dream already shows a way of

to turn off the great emotions.

Then I suggest to the patient to use this initial image

of the dream and to deal with the dream imaginatively,

as she already used to from our work with dreams.

And I told her, I said, look,

this could change the images in the dream

and make the anxiety less.

I say, I would talk to her in the imagination

and if necessary, come to her aid

with an imagination of my own.

I think this is an important point.

When you are working on nightmares,

this imagination, you are a part.

You are, you are in the imagination.

You are in the imaginative field,

and you have to tell your patient that you are there.

And, uh, that sure she has the lead,

but if something is really too scaring

and something is scaring

because these are anxiety dreams,

then I would come to her help.

So I offer myself as a real helping figure

to enter into the imagination with her.

It, that seems to me makes sense with me then.

Uh, it is about effect regulation.

It's a, it's about crisis, uh, intervention.

If you are doing, uh, analysis,

if you are doing individuation process,

you would never would do such a thing.

But it's a crisis intervention.

It's a case that the question of

how can we regulate this emotion?

And then I say, looking with binoculars, with the binocular,

that's how the dream begins.

And the patient, I could look through the right glass,

but then everything is gray and nothing is happening.

I is that possible? She, yeah, it's possible.

I can You also see yourself in the gray environment?

Yes. Even with the girl on my back, right?

Can you see her clearly? Yes.

Just like a film that has had the color taken off.

She's maybe about eight years old, has long blonde hair.

It's still like giving a child a piggyback diet.

She's holding on tight. That's me too.

That's about what I look like when I was eight.

I ask, are you still looking

through the right glass now or already?

Smooth left. It was

because the blonde hair, if everything is gray,

you can't have the blonde hair.

So she has changed.

Yes, ma'am. She's really grabbing on,

she can't be shaken off.

She's strong, determined. It's getting really dangerous.

Looking at it like that.

I think she's scared to death of something

that's on the ground of chasing her.

I Is there anything here, there to see?

No, there's nothing to see. I don't see anything.

But she's scared. But so am I.

Even though I know she's scared, it hurts me

and I can't look at her.

You have to hold her, but you can't.

I think she should take her in, in,

in her arms, but I don't say anything.

I, I repeat. She's clutching. Can we calm her down?

Patient? I'll take her right one. I'll take her right.

Look, once then I can think,

maybe I can tell her I'm not going to throw her off.

If I can stand it, I now take left again

and tell her I will carry her on my back

until she's calm enough to dare to go onto the floor.

And then the patient opens her eyes

and says, that's now enough for once.

And we are based on the subjective level of the dreams.

Uh, we are talking about her fears

as an 8-year-old girl.

So we, we are, we, we, we

quit the, the I imagination

and we are going back.

We take this 8-year-old girl as an image of herself.

And, uh, then she's talking about her fears.

And I asked her, what wasn't this girl

not allowed to show?

And she said, yeah, just so fear, so normal fear

of progress, but also not the fear of the parents.

If they were so changed, if they looked so frightening,

then suddenly she says, tell me,

I'm thinking right now of Saint Christopher

who carried the baby Jesus across the river after all,

and it got heavier and heavier.

Can that has something to do with me.

And I say, sure,

but what do you mean yes, that I have

to carry this girl like a precious burden?

I try to do that in the imagination.

Yes, I can do with it, but I don't cross the river.

I walk downstream near the bank.

The girl is already heavy,

but she doesn't keep getting heavier.

Again, we spoke to each other.

The patient thinks that she must mean something.

It must mean something.

If Christophers is carrying the deity,

but she's carrying the girl, then this is a hint

of the great significance it has for her to carry this girl.

And then she adds that Christophers is not me.

And this reassure this, this remark reassures me,

uh, because an identification

with Christophers would be a little bit very great.

But the figure, figure of Christophers also reminds me

that the three siblings tried an almost superhuman effort

to survive on their own with as few parents as possible.

But where does the image of Saint Christophers come from?

She remembers her grandfather having a key chain

with an image of cro it, claiming that with he, it,

he would never lose his keys to or be in a car accident.

As a kid, I liked the idea of it.

And omelet, I'm sure he didn't believe in it,

believed the subject, the patients are here

is in a circle of fear, management

of magical protection in threatening situations.

I'm talking about something clawing at, at,

I'm talking about something clawing at you like this,

desperate to get to you.

This is obviously the 8-year-old who is full of fear,

she says, but who also shows herself to be determined

and powerful as she was as an 8-year-old

who perhaps has a lot of light scent energy in her

that is being held back by phon.

She talks about how she took such great joy in painting

and drawing that she was also a brave girl.

What was significant for me was

that she brought the river into the imagination

and she did not cross the, the river like Christopher,

but walked along the river.

She walks along a flow of lowering river.

And with the image of Christophers, it is likely

that the patient can cope with this clinging girl

and the whole anxiety scene that is connected with it.

But this at the flowing river, symbolically as a hint

that something has come into flow

in connection with this scene.

The emotional fear causes images in the imagination

to be unable to move, thereby triggering more and more fear.

But now the images are in the flow. Something can change.

I kept these thoughts for myself

and the patient says this,

these thoughts were this coming to my head.

Didn't say anything patient says.

I go, I go on once more into the imagination.

No longer a left glass or a right glass.

I carry the girl on my back.

She's no longer clawing so tightly,

but holding on very determinedly.

I can feel her long blonde hair. It is pleasant, tender.

I leave the river and go to the shore.

There is a place with grass.

I tell the girl she can stand here and come down.

I help her very slowly from my back to the ground.

I don't know if she can stand. She stands.

I turn around, look at her.

She doesn't look at me, but at the ground

and tests it with her feet.

Finally, she says it holds,

it carries it is firm.

And then she hops to the water. I stretch my back.

Have I been carrying this girl all these years now?

So what happened in this part?

Instead of clawing a tender touch through the long hair,

there is an approach for me as a therapist, the part

where the ground is tested, where it is tested,

whether the ground is carrying

is especially important for me.

This was also hint to our relationship.

The ground of our relationship carries,

which is not self evident with this life story.

The girl and her patient can rely on it.

She doesn't have to do everything on her own anymore.

She can get help, at least when the fear is very high.

Instead of having to claw yourself a feeling

of being carried quite normally from the fall,

this patient stretched her back in a very concrete way.

I am really, really relieved now.

She said, I

make an intervention.

I say, let's go back to the dream.

What about it was particularly anxiety provoking?

And she says, this girl who was clawing and getting heavier

and heavier, that was a real nightmare, a demon.

We humanize that one. And I asked, how did that work?

And she said, we talked about the fears of me

as an eight old, but also about my power.

I also got pleasure from it.

When I liked it, everything got better.

The christoffer idea was kind of good.

A apparently I have good ideas. And I said, yes, you do.

Then there was an issue of nobody helping me.

She said, that was so awful in the dream.

I was screaming for help, but nobody was helping.

You offered to help me.

You must have been careful that nothing bad happened.

It was enough that you said it and that I believed it.

You offered to help me.

You must have been careful that nothing bad happened.

It was enough that you said it and that I believed it.

I maybe we could spend another moment on the girl

who checks the ground to see if it's reliable

and then jumps into the water.

Was was that like that?

She was jumping around full of joy, a little cocky,

like eight year olds.

Two, when they feel safe.

That's where I like to feel myself again.

There is pleasure, joy.

This reflection phase I think is very important

to make it possible for the patient to experience

to, to, to, to recall what she had done.

How about what she had changed in the imagination.

It was her competence

and reflecting about means to give the competence back.

It's, it's, I am there and that's fine.

But, but it, it, it's her, it's her creativity that helped.

And after we have been talking

and that she also her, uh, admiring herself

that she had such a good idea with, uh, the, the Christoph.

Then she stretched her back again,

breezed a deep sigh of relief.

And she said, now I can stand upright.

And this imagination was the starting point

of a, a longer series of imagination with the 8-year-old

who had felt that she had not no sure secure

ground on their feet.

And we have a can.

And again, had a complex episode not being able

to leave oneself because, because others are there

but not reachable.

Yes, you can.

And she said this, what I happened with my parents,

that was, they had demonic traits

and she remembered magical fantasies.

They had all the children.

So she decided one day, uh, together with her sin,

she would now become a witch.

And they could, when the parents were once again loaded,

beam them far away into a dark cave

where they could sleep off their intoxication.

I think symbolically

that was a great solution from the children.

And they, they have been very much, uh, influenced

by pp Ltro.

Interesting. The, which was a recurring theme,

omni potent control instead

of risky trust was then the topic.

Even in our therapeutic relationship, the desire

to be a witch arose when she allowed the fears she

had in the face of parents.

But I think a demon can only be fought by another demon.

This why she is thinking about the, uh, the witch.

But now she did it with Summit Christophers

and didn't short of Christophers.

And gradually she remembered her parents, not only

with the empty gaze,

but sometimes also with the creative gaze,

because they had also been very creative

and with the friendly gaze.

So this is a

example how I worked with someone

with imagination on a, on a dream.

And now is sometimes left for questions, perhaps questions,

and then questions

you could show your hands or just start.

Well, Cynthia, no.

So I'm sure you have John, please.

Yeah. Thank you very much.

Uh, this has been, uh, a wonderful, wonderful, uh,

presentation question for you.

Uh, active imagination.

You mentioned that she dialogue in the dream,

and I believe you mentioned in passing that, uh,

this was a form of active imagination.

Earlier you said you weren't going

to talk too much about active imagination.

It's engage. It's about engaging a dialogue.

Uh, was this an example of it?

Uh, and if not, uh, how, what's the distinction?

Uh, thank you, John.

I think it, it was, uh, there had been some little parts

of active imagination,

but actually I would, for me, imagination is active.

When you really are engaged in the imagination,

and active imagination in the strict sense of C

is very often only the talk between the two parts

of the complex, uh, and the, the the adult part

and the, and the, and the children part.

And what Jung wanted this, this, you have,

and you, you, you have an inner image,

and then you switch on the cognitive side

and you take a standpoint, uh,

and you are, you get in relation to this inner image.

This, this is in the, in the industry things.

This is so difficult, uh,

because you, when you are in, in context

with your inner images, you are in the flow.

You let flow. This is also what Jung says.

You let flow and in the moment, then

you get more concentrated, but you are even in the flow.

And if you are, and then you, you step out

and you get, you get in contact.

And I personally, I think I like much more the idea

you have, uh, this inner flow and then you describe it

or you, or you, you, you have a picture.

You, you, you, you paint it

and afterwards you can talk about the painting.

And this is how you can go in the relationship to your,

your unconscious.

But this, uh, I was working with from France

and I had years of experience in active imagination.

Uh, and, uh, and I, I know quite well that it is very,

very often it is just the, to, it's the, the, the inner talk

of a, it's the inner talk of a complex.

And it gets really an active imagination when you,

when, when you consider what, what happened in your psyche,

and then you give it, uh, you, you, you, you give it a form.

And this is also what, what what Jung says.

Uh, Jung says, uh, this inner contents mind wandering,

self-generated thoughts

and so on, uh, this, this,

they are, they are not precise.

They are someone somewhat vague

and they must become visible.

Someone can, must seek, must be able to see it,

to hear it, to grasp it.

And this is, I think this is what is so important

and not so much this inner dialogues be

because, uh, I have the idea that, uh, it was,

the concentration meant much too much on

this inner dialogue.

Uh, and the whole richness of, of imagination is left out.

Dan. Okay, Paige, John?

Yes. Uh, thank you very much.

What an, what an in what an interesting, uh, time.

Thank you very much for what you've said, especially

what you've just said now.

Um, which is the thing

that's been interesting me, uh, a lot.

Um, you were speaking about effective neuro, um,

neuropsychology, and I've been very interested in that

and also with neurodiversity.

And, um, what,

what I've become more interested in is the idea

of affect attunement of Daniel Stern's idea

of affect attunement.

Mm-Hmm. And it seems to me that that's

what you're emphasizing is, is, is not

to move too quickly into the conceptual aspects of things,

um, or interpretations

or even what you could call insight that just to meet

at a physi physiological level, the kind of reptilian brain,

the rep, the, the really,

Yeah.

Yeah. And I mean, I was struck, I was struck

by the crocodile on the, on the passenger seat in terms

of the reptilian brain,

but that was just my own association.

No, this is also a part of it. Sure. Yes.

But, but I, I like your idea

that we are not coming too quick to the insights

and that we, we are in a effective attunement to the dream

and to the imagination.

Because you can also, uh,

if you are only talking about imagination

and you don't have the emotion,

then you are also not attuned.

That's, and and this the insights,

I was one thinking about this different periods

of analytical work.

The first gen, the first generation of analysts,

they knew the, what a dream meant.

Mm-Hmm. They had a dream.

They even didn't know, didn't need some, uh, association.

They just knew because the analyst was the one who knew what

you was an authority.

He knew what to do. Uh, then next generation, uh,

Paula Hyman came, she was talking about transference

and counter transference and saying, okay,

but the analyst has only all these, all all the,

he has also, uh, an an Im impact on, on, on this,

uh, uh, on these dreams and so on.

And so they have been talking a little bit more about, uh,

associations and what could the,

what could the analyst contribute.

Then we have this whole situation responding, uh, the, the,

the bonding series stern and so on.

And, and that was much more with this attunement.

And it's much more of this that we are, we are emotionally,

emotionally ContEd

and that, that, that out of this, I think it is not so much

interpretation because interpretation

always says, I know it.

Mm-Hmm. If I do the interpretation

of a dream, I'm the authority.

And I think we are not anymore authorities.

We are helping the people.

And, uh, and when we are working with imagination

with the dream, then you can get really some

wonderful insights.

Some wonderful insights are emerging.

For example, this insight with him when he said, yeah,

but all women, uh, are in, in the first,

they are nice little, uh, crocodiles,

and then they buy it and so on.

Yes. This is really, this is on, and this is not my insight.

Mm-Hmm. And this is not something I put onto him, but,

but this is what is coming up in him,

and this is what, this is what, what happened.

And sure, uh, uh, in, in the end, we could talk about

the Egyptian God taught.

We could also talk about the, the, the, the, the, the brain,

uh, and and so on.

But actually first, we, we, we, we have, we have

to be attuned to it.

And, and, and then it is creative.

Thank you very much. It has also to do

with the development in, uh, in, in, in the, in the, in,

in the analytical generations.

And naturally you can, you can have an analyst who belongs

to the first generation.

The, even now, not everyone, not everyone changed,

but I hope that this generation will

not be anymore.

So not for a long time active.

Yes. Yeah. Thank you very much.

What a wonderful response. Thank you,

Bill.

Thank you very much for the presentation.

Um, I'd like to sort

of ask a little bit more about enablement, if I could.

I think there's almost the enabling gaze such

that's very interesting, I think, um,

and clearly it's like an enabling

attitude that we're talking about.

And that could be just giving the patient your full

attention or the client, your, your full attention.

And I guess a certain amount of nonverbal attitude as well,

you know, giving attention,

maybe even hand gestures and so on.

But I guess enablement can go a bit further than that

because enabling kind of means like giving tools to,

I think, you know, if you, to follow that definition,

you know, the entomology, um,

and I wonder how far, you know, we should actively enable,

you know, how far that can go.

It's very interesting. Um, I mean, for example, the,

the little imagination act that we started with, uh,

you started us with going down the street, the bakery

and so on, you know, the enabling people to be more imagin,

to use their imagination, to let, they're allowed

to release, you know, their imagin, their imagination.

Um, yeah. The question is then how far does enablement go

or how far can it go?

Um,

Well, I like, I like your idea that, uh, some,

some are facilitating, enabling.

This is really, this is what we have to, to help people.

We have to, to, to facilitate. We have to enable them.

This is also what we are doing in supervision.

I think supervision has nothing to do with control.

And the supervision has to do with enabling it,

giving people the confidence that they can do it,

and that what they are doing is good.

Now, with I, with imagination, uh, I personally,

I, I'm such an imaginative person.

When I was a young child, I did read a lot of books

and I was always very imaginatively involved in these books.

I was living with all these families

and with all these black people, and with the red people,

and with everyone.

So I think if you are a reader, if you have been a reader

as a child, you are a person

who is very much in, in imagination.

And very often in supervision, people say,

but how do people just do the imagination?

They say, because I trust it.

I, I, I, I, I just, uh, just say, now you have a dream.

Let, let's, let's talk about these images in the,

let's talk about these images in the dream.

And then sometimes I ask themselves, I says,

can you describe it a little bit more

because I don't get the whole picture or this, the emotion.

And so, and so you, you, you, you can, you can help them.

Mm-Hmm. And, uh, if people do not want it, uh,

there are people who are very, very intelligent,

intel intellectual,

and then, then they say, no,

this is a method I don't like at all.

And, uh, sometimes they leave you,

sometimes they come one day

and they say, could we try you a strange methodology?

Mm-Hmm mm-Hmm. But the questions,

the question is really how, how I,

what is my context to imagination?

Where is my imagination? Actually?

Imagination is something archetypal.

Uh, imagine how life would be without imagination.

Uh, this is absolutely impossible

because if life had no, no imagination, yeah.

Uh, we, we couldn't think about what is going on.

We, we have no art. We have no stories. We have no ideas.

We couldn't think how,

how the other one is thinking in his head.

Uh, we couldn't do another, uh, therapy.

And at least we couldn't think about

how life would be without imagination.

Because for this, knowing how life is without imagination,

we need the imagination.

So imagination is something is, it's there,

but it can become more fluid or less fluid.

And this was why I was first in the, I did the, uh, the,

this little exercise in the beginning,

because for some people, imagination is only visual

and, uh, uh,

but, uh, of, uh, uh, flow, imagination, flowing,

imagination comes with all, with,

with all channels of the perception.

And actually it is, the more you have anxious,

the more it is blocked.

It's clear. And this is also why perhaps you saw it also in

the, in the example then you, you, you, you leave the,

the imagination.

You start to, to talk about you, you start to reflect,

and then you can go in again, this is not only

because she has a binocular, this is what usually we do it,

it can be more clear.

Uh, you, you try to understand,

and then you, you feel, you feel you, you feel assured.

And then you can go again and confront anxiety.

Kim,

Thank you. It

makes me think of, um, I'm a, a therapist,

but play therapist in particular.

Um, and what is the combination, I guess, of client centered

and just working with flow

and how, especially in sand tray, um, using miniatures

or images and creating the story

without me going into the questions.

Um, because really questions ultimately are, for me

at least in breaking up flow,

the hard part is sometimes translating the felt sense

of the playroom or the felt sense even

with adults doing sand tray or expressive piece.

But the translation to particularly

parents, what are you doing?

What are you doing? Like giving the, you know,

more intellectual part of trying to break that down,

um, is difficult.

Or writing notes or insurance, you know,

because we get, we tend to see fall to the literal

or to the analy, you know, to not the analytical,

but default to like CBT

and what are the interventions and what does that look like?

And it's so hard to communicate. Particularly.

I've had a recent, um, Trey experience with, uh,

a little 6-year-old who's had different themes,

and it's just super powerful.

And I stay away from the interpretation,

but just lovingly, both parents are very intellectual, like

engineer medical and the breakdown, you know, it's so hard

to communicate and just also have the experience, um,

to those who are looking for the valid, you know,

what is valid or what is

the hurried need to get someone better.

And I know that was jumbled, but nonetheless, um, it

Reminds the, the, the difficult, uh, to communicate is

with all the people who don't have a symbolic view.

Uh, this is the problem with CBT, because CBT is okay,

because sometimes you have to learn, so,

and you have to unlearn something, that's no problem.

But for us, we think that everything is symbolic.

That everything that happens in the world

has also a meaning.

And if you, you don't have this, this view, uh,

then you are playing around with your centre.

And, but actually I think, uh, what, what,

I did some supervisions with centre,

and I had the idea that the crucial moment was when I said,

and what did you do?

Uh, in my exam, uh, in my example, I thought

we had some reflection when I asked her, what happened?

What happened now in your imagination,

and what, what was, what was, what did you experience?

What helped? And I think this is such an,

such an important point.

And I had sometimes the idea that this part

because, uh, people with centric, they are

so much in this magical, uh, symbolic

doing with the hands that sometimes it's the, uh,

that the reflection about is not good enough.

Uh, or, uh, and, and, uh, but I think it's so important

because when you reflect about, you know,

what you have done, and this gives you an idea

that you are self competent to the analyst,

and I have the idea,

when you do this more than perhaps you could

also better communicate.

But I think, uh, you have to go to the basis.

And the basis is, look, we, our, our world view is,

uh, that the human being is a symbolic animal.

And, and that,

and this means everything that exists in,

in the world means something.

And if you don't share it,

you perhaps you can't understand each other.

This is why some people become ccbt therapist

and others become unions.

It can be very challenging to communicate,

especially being neurodivergent

and like watching all the parts.

And then yeah, the translation, without going on too much to

communicate what it means about symbols and

Architecture. But,

but, but, but I think the question is

what have you now experienced?

What happened when you put this bridge, uh, on the, on the,

not anymore in the centers, on the underside.

And sometimes they will say,

nothing happens, or I don't know.

But very often people can tell you

The people who do are having the experience.

Can I, I, I guess to parents or to others

or for insurance purposes, mm-hmm.

Communicating there. Because when I do a sand tray

with someone, I invite them to tell me about their world

and getting out of their head, looking at the beings

and the, what does this one know, not

what do you know about this one?

What does it feel like to be this one in the tray?

Does this one notice that bridge is there?

So you remove that just like the

Anything out. This does not, it

does not help in the,

in the moment when you start, when they choose you

to do interpretations, then it, it kills something.

Yeah. And I mean, the reflection is

for me not giving an interpretation.

It's also not me.

I'm leading people to tell me what hap

what they have experienced

and what they have experienced that make them feel better.

What they notice. Yes.

And what they notice, not what I necessarily notice.

I just kind of point I didn't get my hands out of it.

Um, that one there, I don't even label it that one with

that one there, this, you know, that being,

and if they say it, then like, that's a cow

because my interpretation of, um,

it's a horse and they say it's a cow.

It's not up to me to te I'm not the teacher in that moment.

I'm not the teacher to say actual blah, blah, blah.

It's what the per, once they give it the label,

then I use the language of the person too,

which is really important.

It's a lot to it. Um, and yeah, I love this.

And so it's been very helpful too with the dream world.

cause that is not an area, um, yeah, much

scale in or I don't know.

Thank you. Thank you.

All right. If there are no longer any other questions,

if there's, oh, there's one more question.

Okay. Juanita, if you want to,

and then we'll close out after your question.

Um, we're at almost at 12 o'clock. So go ahead, Juanita.

Hi. Um, I actually wanted to interject something as, um,

an internationally certified Santa place therapist teacher.

I, I feel I have to interject here that, uh, barina

what you're saying is one of our philosophies

and one of our foundational philosophies is

what we call delayed interpretation.

We do not interpret, I mean, we have our minds

of colors going and going with your ideas,

but we do not interpret to clients.

There's a thing called delayed interpretation, which later,

at a later date way

after they've closed out their process,

like maybe five years or more, the client might come back

and view the slides of their sand trace,

and then we discuss any memories or feelings they had.

And we can interject ideas we have at that point,

because we believe that the individual

individuation process is an in internal process.

Our part as the therapist is to just hold the safe place.

So I just felt responsible to add that

because I am internationally certified.

This is, this is a wonderful idea when they are coming

back, uh, after five years to discuss it.

But, uh, I think we, we, we should,

we should think about what is our contribution,

even if people, we,

we think we let them do the cray and so on.

But I have the feeling in our minds

and in our bodies a lot is going on,

and this what is going on.

We are almost not able to grasp it.

And I think at least in,

in very emotional situations, we should do it.

That would, that could be very interesting.

Kristen. I think

What we believe is what the therapist

and the client join, like you're talking about attunement.

We believe the attunement is in the tray where we join us

through the miniature collection.

We've selected our collection,

and the client selects their

trays from our collection and we joined in, in the tray.

That's like the sacred space.

And that's where we join, that's where the attunement is,

and that's where the, we create that space for the healing.

Yeah. Yeah. I only, I only think, uh,

we create this space.

I am, I absolutely agree that we create this space

and that we have to be very modest

because, uh, we, we are not only the one

who creates the space, we allow the space,

but the space is created between both.

Uh, and there is, we have, we,

I think we could do some more research what happens in this

and what happens in this space and what is our contribution.

Great. Well thank you so much

for everyone who was able to attend.

Thank you so much for Verena for your presentation.

It was wonderful. Um, you have a lot

of people saying things within the chat, so thank you again

for everyone's time today.

Um, and there will be a recording

that will be being sent out later on.

So thank you again