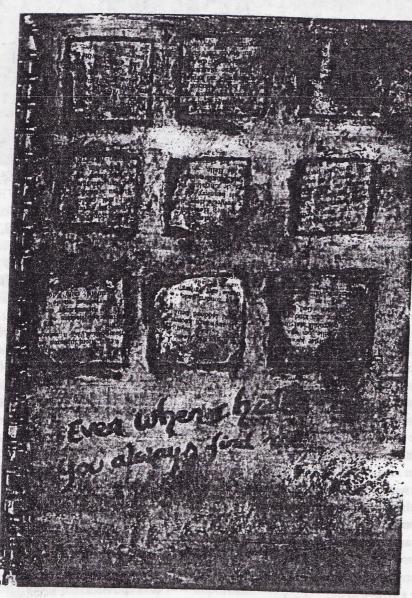
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Dreamwork and Shamanism



Getting Unstuck

Using Dreamwork to Transform Trauma through the Guided Active Imagination Approach* (GAIA*)

Linda Yael Schiller

The Nature of Dreams and Trauma

ho hasn't had the occasional experience of waking with a gasp, or a pounding heart, or a sense of anxiety or dread after a dream? The monster, the missed exam, the broken down car, the things that go bump in the night: these dreams can leave us with a feeling of unease or panic and sometimes linger throughout the day or longer. When these nightmares are only occasional, they can signal some upsetting experience in life that the dreamer may need to understand and resolve, and then be able to move on from with relative ease. Once we have received and understood the message our dreaming self has brought to our awareness, and taken the steps to remedy the situation, these occasional nightmares resolve on their own.

This straightforward dream work is not the case, however for many survivors of long term or serious trauma. The dreamers with these histories can find themselves held bound and captive by reoccurring frightening dreams or dream themes and the concurrent emotional states of fear, anxiety, dread, panic, shame, rage, disgust, sadness and despair.

These get recycled over and over again, sometimes for years on end. This is the "stuck" nature of traumatic stress. One dream circle member who worked brilliantly on her dreams for years would inevitably hit a brick wall around certain dream images that had to do with her father and certain rooms from her childhood home—she simply refused to go there. She would say to the group "I'm done now" even when we all knew (including her) that she had not gotten to the core of the distress in the dream. The anxiety that arose for her around processing these images was greater than she could bear

The GAIA* method of Guided Active Imagination, based on Jung's original work in active imagination, allows the dream worker to gently support and guide the dreamer by accessing additional resources both before and during the dreamwork. By using some of the gold standard principles of trauma treatment, and applying them to the dreamwork in a variety of ways, the dreamer can remain anchored to safety while processing the dream material.

Trauma can take the form of "public" or "private" events—public events are those that are witnessed and/or shared by others such as natural disasters, car

accidents and war traumas, and private events are those that are usually not witnessed by others because they occur out of sight—such as physical, sexual, or emotional abuse, battering, medical trauma, and witnessing violence

For some nightmare sufferers, these emotional states can make sleep itself something to be feared, creating a secondary trauma of sleep phobia. Trauma survivors who are plagued by nightmares or night terrors can develop a phobic response to sleep itself or to dreaming. The original events then become compounded by lack of sleep and/or lack of REM sleep. As we all know, when our sleep is chronically disrupted all else goes to pot as well. Exhaustion brings an array of other secondary problems with itirritability, lack of concentration, and somatic and physical upsets such as headaches, muscles aches, and fatigue. Thus the past traumatic events and the current states of exhaustion engendered by lack of deep restorative sleep and dreams blend to create exponentially more distress.

One of my clients had her nightmares "contaminate" her bedroom as well, so she could no longer sleep in her bed. Luckily for her, one Christmastime she discovered that the lights on the tree



Roberta Hinds, The Dying Boy, Collage, 8 1/2" x 11", 2010

were soothing and comforting for her, and she took to sleeping in the living room under the Christmas tree in order to feel safer. She negotiated with her roommates to leave the tree up until April, when they finally protested the amount of dry pine needles they kept stepping on throughout the house. We figured out together in her sessions that she could instead buy a small artificial tree and put it in her bedroom with the colored lights on as a stopgap measure intil the nightmares were sufficiently esolved. This was actually a significant tep in her healing work- to see that she ould have greater control over some art in her life, and that she would no onger be kept out of her bedroom by he monsters in the night.

)reams and Dissociation

ometimes the dreamer wakes with emoons or sensations and knows that they e connected to the dream or nightmare ey just had. At other times the dreamer ay wake with only an unexplained feelg or sensation, and the dream that it is connected to has evaporated with iking consciousness. This common perience of dream "evaporation" when a wake can also be a form of dissociation that mimics the dissociation experienced by some survivors in waking life. As a coping mechanism developed by some trauma survivors, the traumatic events themselves and the emotions and/or physical sensations connected to them are disconnected from each other—that is, dissociated from each other. To resolve trauma fully, they need to be re-integrated and re-connected.

One additional important note about dreams and memory: when working with post trauma dreams, keep in mind that while many of the images may be symbolic and metaphoric, others may be actual "memory bursts" that are first making their way from complete dissociation into consciousness through the avenue of the dreamscape. It can at times be difficult to distinguish between dream metaphor and event memory, so reserving our own judgment or decision is important.

Trauma survivors can find themselves hijacked by the nighttime manifestations of these past traumas, looping endlessly in fear and anxiety, and not able to experience the compensatory or healing potential of their dream states. The repetitive nature of these dreams or dream themes is in effect an SOS from

the unconscious. Until the dreamer can get a message through to their unconscious that they are now safe, that the past has ended and they are now in the present, they can be stuck in this continuous feedback loop both while awake and while asleep.

Safety First: Adhering to Trauma Treatment Standard of Phase Oriented Treatment

When working with dreamers who experience these fears, we must be careful not to inadvertently re-traumatize them while doing dreamwork. By going too fast, or pushing too hard, or having our own agenda, we can create more rather than less distress through the dream work. We also need to take care when working with the dream from the inside (i.e. through Jung's active imagination approach, or Bosnak or Moss's adaptations of that or other dream re-entry methods) so as not to suddenly have the dreamer abreact—that is, to experience unmanageable panic or fear as a result of working with the dream material. Our first priority, from Hippocrates on, is "Do No Harm."

We need to take care not to get caught by the tyranny of our own enthusiasm to work through a dream at the expense of the dreamer's emotional safety. Here is where adhering to a method such as the Guided Active Imagination Approach can be useful. It is based in part on Judith Herman's protocol for phase oriented trauma treatment. In 1982, in her seminal book Trauma and Recovery, Herman outlined three main phases for treatment of trauma. Since then, phase oriented treatment has been expanded on by many others (van der Kolk, Chu, Lowenstein, van der Hart, etc.), but Herman's remains the most basic. Her three phases are:

- Safety (from dangerous situations, from others, and from self harming behaviors)
- Remembrance and mourning (recounting what happened and grieving the attendant losses)

 Reconnection (to the world, to others, and to the parts of oneself that have been lost)

Finding the Gift in Every Dream

An orientation to dreamwork that I adhere to in work with all dreamers is to look for the gift in every dream. The Talmud, the sacred Jewish text that offers further explanations of what is written in the Torah (the first five books of the bible) encourages this approach. The Talmud teaches that "all dreams follow the mouth," meaning the mouth of the interpreter. What the interpreter says can have a profound effect on the dreamer, so it is important to let the highest and w/holiest truth from the dreamer come through. Kabbalah, the mystical realm, also teaches that dreams come as a source of healing and that meaning follows interpretation. It is thus imperative on us to find this hidden gift, especially in distressing dreams. (Schiller, 2007)

In ancient times elders, sages and shamans from many cultures "told" us the meaning of our dreams (as did our more recent Freudian disciples), rather than the orientation more common today whereby the dreamer has the final say on the meaning through their own experience of the "felt sense" (Gendlin, 1979) of the "aha." The explanation we arrive at for the meaning of a dream can have a profound effect on the dreamer, and can make the difference between a healing session and a re-traumatizing one. If our "mouth" says "this dream is bad or dangerous," the message the dreamer carries away is: "I am bad, or dangerous, or my life is out of control." If our "mouth" says, however, "let's find the gift that is buried here, even in this nightmare; let's find the buried treasure, especially in the rubble," then the dreamer leaves every dream with a piece of transformational healing.

I once had a client come to me for a dream consultation because the leader of a dream group she was in told her that she thought her dream meant that she was having a psychotic break, and that she should check herself into the nearest psychiatric hospital. Her dream involved

her walking down dark deserted streets while experiencing a sense of alienation, fear, and sadness as she approached bombed out shells of buildings. Emerging from the buildings were ghosts and demonic figures that began to fly toward her and then swoop around her calling "Whoo, whoo."

A competent if anxious professional woman, her first question to me was "Do you think I am having a breakdown?" After taking a brief history and assessment of mental status, I found nothing pointing in that direction. Since this was a dream consultation, we got quickly down to the business of the dreamwork. Using Gaia* and other methods, including the Gestalt technique of conversing with the dream characters, what first emerged was mid-life career indecision. She had been feeling increasingly alienated in her work, and recognized that she was working in a dysfunctional and poorly lit (dark) office with a "demonic" boss that she experienced as still running his business with the "ghosts" of his father and grandfather making the business decisions as if it was still 1952. When asked if she felt safe enough to converse with her flying dream demons and ghosts, it turned out they were saying, "Who, who are you?" Using Guided Active Imagination, the gift they presented her with in the dream re-entry work was a Purple Heart, for courage and valor under fire. After the work inside the dream, she could see the similarity between feeling stuck in this job with its "demonic" boss and her earlier history of growing up stuck with a brutal father who regularly terrorized the family. She compared her childhood landscape to a "war zone," complete with metaphorically bombed out buildings. Not a surprise, it turned out that she was born in 1952. Using the "gift" from the dream, she was able to access her own courage to begin the process of looking for another job rather than a hospitalization, and to take an additional step in reclaiming her own identity (Who are you today?) rather than living with the "ghosts" of her past forming her identity.

As Scott Sparrow said a few y there are no bad dreams, just unto nate dreamer (or, I may add, interioresponses. The gift may not always be pleasant one, it may be something we would rather not know or do, but if it asked for in the service of our highest good and best self, it is sure to lead us out of the loop of nightmare.

The GAIA* Method

In keeping with the priority of safety first, we need to spend more time estab lishing a felt sense of emotional safety and relational connection with the dreamer before delving into the dream material itself. The following protocols are suggestions for the pre-dream work of preparing to safely enter the dreamscape, and then the dream work itself for lowing the protocol of the Guided Active Imagination Approach. Using tl method reduces the risk of the dreame. exceeding their "window of tolerance" (Ogdan) for emotional upset or experiencing a re-traumatization from doing the dreamwork. In GAIA* the worker intervenes more than in traditional acti imagination, with an eye to adding safe to the experience. While not changing the dreamer's own process, we monito it more closely and make suggestions s that an outcome of a safe conclusion is key part of the work. We can let the dreamer know that there is a difference between feeling uncomfortable and fee ing unsafe while doing their work. "Uncomfortable" is still tolerable and can lead to growth and healing; "unsat

Pre- Dreamwork GAIA* Safety Protocol: Part 1

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we can go in one session.

In keeping with phase oriented trauma treatment, address the safety needs of the dreamer before going into the dream itse After they share it, you ask if they want to work on it. (Sometimes just the telling of the dream is as far as the dreamer is able to go at first.)

- 3. Share with client the orientation that there is a gift in every dream. We orient ourselves in that direction before going on. This is part of the "guided" active imagination where, as in Neuro-Linguistic Programming, we presuppose that there will be something positive or healing to find out, but do not presuppose what it may be. (The gift can be information, direction, insight, connection, an object with meaning etc.)
- 4. Ask the dreamer: "What do you need to feel safe and protected enough to address this dream (or this part of the dream), or to go back inside the dream and find some answers and healing?" Explore with the dreamer options of what people the dreamer needs to invoke for safety-real people or imaginary, alive or dead, that the dreamer knows or just have read or heard about. (If they need suggestions, you can propose family members, friends, yourself, pets, characters from books or movies, or sacred or power beings (God, any Sacred Being or Higher Power, Jesus, Buddha, angels, any particular angel, nature spirits, departed relatives, spirit animals or guides, etc.) Ask the dreamer if there are any protective objects they need for potential obstacles they may encounter in the dreamscape. The idea is to be very specific, only limited by the dreamer's and your imaginations. Remind them that since this is a dream journey of their own creation, they can bring anyone or anything they want into it! Some examples of safe passage objects have included: a flashlight (since it was dark in the dream), a baseball bat (for protection), an invisibility cloak, their pets, my cats (who frequently share the space with us while I am working), a
- the dreamer—the colors, size, texture, smell, sensation in their hand as they hold it. We are beginning to weave the Guided Active Imagination Approach even as we prepare to work on the dream. You are guiding their exploration, but not adding your own details to it, by simply asking them to describe the object, and prompting or cueing them until it is a "thick" description.
- 6. Be prepared to keep asking, "Is there anything else you need to be perfectly safe?" and "Check to be sure you are really safe and ready" before re-entering the dream. Keep asking until they say they are ready.
- 7. Find out how old the dreamer is in the dream, and how old they feel as they retell it—it may not be the same age. Get the protection that the "youngest part of you that is present" needs to feel safe and secure.

Example of Pre-dreamwork GAIA* Protocol

Background: "Thomas" is Irish, in his 30s, the youngest of seven siblings. As the youngest he had to share a bedroom upstairs with his parents until he was ten, and older siblings moved out to make more space. (As I was taking notes, I originally wrote "scared" instead of "shared" bedroom, my own "Freudian slip.") His father was an alcoholic who severely battered his mother and beat him and his siblings. He recalled being afraid to go to sleep at night, fearing that his father would hurt his mother while he was asleep. He was also bullied at school, thus finding no safe haven until he reached high school, where he excelled at sports and found some teachers as mentors. He currently works as a construction manager.

Thomas reported that his dreams are usually full of fear, and he wakes in the night with panic. Dreams of natural disasters, darkness, and raging men were common. A reoccurring nightmare of a dark room at the top of a flight of stairs

impending danger without resolution.

In following the pre-dream protocol, the first step after agreeing to work on the dream was to identify his guides and resources. He chose to accompany him in the dreamwork Gandalf from Lord of the Rings. I then asked for Gandalf's qualities, what would make him a good guide. Thomas replied that his view of Gandalf was a figure who was "kind, benevolent, wise, strong and understanding, a wizard with power, who was entertaining, and good with children." When asked about Gandalf's "job description," Thomas said that his primary task is "to protect the community and prevent evil from entering, and that he was imbued with a great hope for life." His second guide he called Father Sky, who he described as "light, uplifting, freeing, who can give you freedom like a bird, and can be seen in the rays of the sun through the clouds." (These two resources were clearly "Good Father" images that helped to compensate for the one he had). As I kept asking "Is there anyone or anything else you need to feel really safe for all the adult and child parts of yourself?" he added his mother, his deceased sister Bridget from heaven, and his childhood dog Rollo. Thomas now felt ready to enter the dream work proper.

GAIA* Protocol, Part 2: Working Inside the Dream

Originating with Jung, and augmented by Bosnak and others, Active Imagination is a return to the reality of the dreamscape: re-entering and moving back into the inner landscape of the dream, with the goal of having an active encounter with the dream world and characters that are there. The GAIA* method adds to this process the additional orientation of more active guidance on the part of the dream worker. While continuing to honor the integrity of the dreamer's inner world and direction, we are consciously and clearly pro-

continued on page 30

viding the container of safety, and are ready to intervene and redirect if the dreamer begins to abreact or feel unsafe. We continue to help the dreamer access his/her guides and safety objects, and provide the orientation that they will be able to learn something from the dreamwork in a way that serves their healing and highest good. We help the dreamer move through the dream, without adding or changing it ourselves, and continue the process of external guidance until there is some kind of positive shift or learning or arrival at safety. We work with the dreamer until they feel safe, empowered and protected, either within the dream, or by continuing the dream story past the point where the dreamer originally woke. We may offer possible directions or ideas for the dreamer to choose from if they get stuck, reminding them that here and now they are empowered to make any changes they want, since they are in control of their dream journey process. This is in contrast to when they were helpless during the traumatic event(s), and also in contrast to when they were spontaneously dreaming, unless they are skilled lucid dreamers.

We can remind the dreamer that even as they imagine a new outcome, response, or learning from their dreamwork, a reprocessing is actually happening within their

body/mind/brain/neural circuitry. This reprocessing of the meaning and effects of the traumatic events contained in or pointed at by the dream is similar to the hypothesis of how Eye Movement Desensitization and Reprocessing (EMDR) may work. EMDR (Shapiro, 1982) works by accessing states of dual consciousness in conjunction with a cognitive protocol and bilateral stimulation of the two sides of the brain through visual, auditory or tactile input. Recent research has found similarities between EMDR and REM sleep in both the brain processes and location in the brain where the activity is found. (Stickgold, 2004).

It is also useful to keep in mind Hartmann's concept of the Central Image—the emotional heart of the dream. We can ask the dreamer if we should we begin there, or if it too intense a place to start, and thus we should use the back or side door entryway to the dreamscape, rather than the front. In general, the higher the intensity of the C.I., the higher the emotional impact of the trauma. In addition, we can assign dream incubation as homework between sessions, to dream on added safety, or the answer, solution, or resolution of a distressing dream or life event.

Guided Active Imagination Approach on Thomas's Reoccurring Theme of Dark Room

Thomas's dream

I have a reoccurring nightmare of a dark room at the top of a slight of stairs where some unnamed evil entity is lurking. I feel impelled to go up and investigate, but I can't, it is too scary. I wake up in a panic every time I have this dream.

(The following contains the main points of the sessions, edited for brevity.)

Session 1

After completing the pre-dream protocol, I have Thomas gather up his guides and resources and then proceed as follows:

1. "Are there any associations that you have with any part of the dream?" This question is frequently asked later in a dreamwork process, although with trauma survivors it can be useful to ground and anchor the associations early on so that the "road map" is clearer from the start.) Thomas: "When I first came to town I stayed with my sister who said the next door house was haunted, that it had a "history". I'm also reminded of my Grandma Maggie's house, and it seems that the "entity" from the dream house is from a spirit realm. My grandma really believed in that stuff." (Note: we are already oriented

- that the dream may have some to do with his family "history".
- "Where shall we enter the dreamstrongest emotional place, or the safest place, or the beginning of the dream?"
 - Thomas: "The bottom of the stair-case."
- (Suggestion) "Why don't you first invite Gandalf, Father Sky, your mom, your sister, and Rollo (his dog) to keep you safe and protected as we proceed."

Thomas: "OK, I've got them."

- 4. I take the initiative here to add a banister to the staircase: "Notice that there is a banister for steadying yourself that many have safely used before. What does it look like to you?" He then describes a banister of dark smooth wood. This is a hypnotherapeutic technique. I add that he can stop and breathe at any time, gather more guardians, etc. and always ask before proceeding, "Is it safe to go on now?"
- 5. "What do you see/do next?"

 Thomas: "I go up the stairs, but there is blood on the door handle. I can't touch it, but can open it with the power of my mind with Gandalf's help. The door opens into a dark room. I see curtains blowing in the wind and feel disoriented."
- 6. "Do you have any associations to this room?"
 - Thomas: "Yes—up the stairs to the bedroom where I grew up, I'm 4 or 5 years old now." As his distress increased, we added an energy tapping protocol to promote emotional regulation. (Note: Here he has moved from the point of entry in the dream to the associational actual memories the dream has triggered.)
- "Do you need anything else in order to continue safely?" (This is asked periodically.)
 - Thomas: "No, I'm ok to go on."
- 8. "Now what do you see/feel?"

 Thomas: "I feel really anxious. I remember waking up with the curtains blowing—like a spirit blowing in."

in across the room, he's calling ir names, now I hear grunting. I'm afraid my mom will be hurt or killed. That's it." In the office, Thomas starts coughing. He takes a drink of water.

10. "What happens next? It didn't just end here. Then what happened?"
This step is crucial. Play out the scene until safety or calm is returned.)

Thomas: "They quiet down, my father ran out of gas, and eventually we all went back to sleep."

- 11. "And then what happened?" (I am remembering his fear of harm or death to his mother)

 Reply: "Nothing."

 "What happened in the morning?

 Was everyone alive and safe?"
 - "Yes."

 "Was you mother harmed, as far as you know, that night?"

"No."

"Were you ok?"

"Yes"

"Where was your father then?"

"At work."

"And now?"

"He's dead."

"When did he die?"

"Twenty years ago."

"And your mother?"

- "She is coming to visit in a month."
- "Is she alive and well?"
 "Yes."
- 2. "Is there anything else that you need to do in the dream or out of the dream to feel complete today? Is there any place that still feels unsafe in the dream?"

 Thomas: "No."
- i. "What are the insights that you can take with you today from this dreamwork?"

Thomas: "That I have more help than I realized, that I can access spirit worlds too—grandma may have had something there! and that this dream wasn't finished just in my sleep—it's over now. I could never get up to

The last bits of dialogue demonstrates the importance of taking the dream work through to this point—the current reality of now, which is twenty years later. His father is no longer alive and he and his mother are both safe. As we moved out of the dream itself to work with the associations pointed at by the dream, Thomas was able to feel some closure and no longer experienced fear when looking back on the original staircase of his dream.

Follow up: This theme has not reoccurred in six months, after years of chronic reoccurrence.

Thomas was asked to incubate dreams during the subsequent week with goal of "beginning life anew without being ruled by fear."

Session 2: Follow up dreams

1. A hurricane is coming. I panic and look for safety. My mother and sister are there too. We find a basement room with a door, go inside, and we're all set—safe inside the basement fallout shelter until the hurricane passes.

(His emotions at end of the dream were: Safe and secure, assured that the storm will pass.)

 I'm at a building site, measuring with a tape measure. I drop the tape down from ground level to the foundation of the building, to the bedrock. It hits the bottom just where it should.

(Emotions at the end of the dream: satisfied, feeling in control of the building process.)

Noteworthy changes in these from previous dreams:

- Everyone ends up safe inside this dream (including his mother), and the storm is known to be transient. The danger is resolved inside the dream.
- (Remembering that he is a contractor) He got to bedrock (note play on words with "bed"), the foundation is solid, and he can take its measure. He's hit the bottom, there is no farther down to go, it's

themes change overtime can signal the process of resolving trauma. Sometimes the nightmare simply ceases, as with Thomas; sometimes the images are the same, but the context and emotional tone shifts (e.g., if Thomas had had another staircase dream, but this time it was "The Staircase to Heaven").

In addition to the methods outlined above, we can also use art (Reis, P. and Snow, S., 2000), movement (Ogdan, Minton, and Pain, 2007), psychodrama, and other expressive methods to move the dreamer through the transformative process of greater integration and of healing through dreams.

In summary, using the Guided Active Imagination Approach* with chronic nightmare suffers and trauma survivors can aid in keeping the dreamer safe and engaged in the process, and move them further on their journey toward finding peace and sweeter dreams.

Linda Yael Schiller, MSW, LICSW is a psychotherapist, consultant, supervisor and teacher in Watertown, MA. Her practice includes energy psychology, body-based modalities, spirituality, hypnotherapy, and of course dreamwork. She teaches and consults nationally on dreamwork, trauma treatment, and integrating body/mind/spirit into healing work, and can be contacted through her web site (www.lindayaelschiller.com).

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