

Report on a Learning Project:
Chronic Symptoms & Dreaming – Exploring the
Connection Between Chronic Symptoms and a
Childhood Dream

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Introduction

In Process Work, dreaming is a fundamental concept. In fact, according to Process Work we dream all the time, even when we are awake. Childhood dreams in particular, are considered very important because at that age our conscious self –our consensus reality self- is closer to our subconscious self – than at any other age. That is, because as children we are still spontaneous, our thoughts and words are still uncensored; therefore our dreaming processes are rawer and closer to the «Big U». Mindell describes the «Big U» as the thread connecting all our dream fragments, the sum of all our parallel worlds and it contains the major direction of our life (Mindell, A., *Earth Based Psychology*). The Big U is more connected to our subconscious self or secondary identity. That means that into the childhood dream, we can find some of the possible paths and directions that can create the Big U.

Primary and secondary identities are fundamental concepts in Process Work. Our primary identity refers to what is known to us: beliefs, morals, characteristics. It is how we identify ourselves. Primary identity is not friendly to what it does not know, it marginalizes these experiences. Secondary identity is our subconscious self that includes all marginalized qualities that are disavowed, unknown, unfamiliar and usually disturbing. The boundary between primary and secondary processes is called an edge. When we are close to a more secondary feeling or quality, if we do not process it we get stuck there, we find ourselves at an edge.

In Process Work, chronic symptoms are considered to carry energies –usually disturbing ones- that if we integrate in a more conscious way, they could favor us in our everyday life. Process Work theory supports that into the childhood dream, we can find the energy of a chronic body symptom, manifested as a figure or a quality in the dream.

In this learning project, I explored the connection between chronic symptoms and childhood dreams, by working with my advisor in the following question: *Does a disturbing experience in a chronic symptom appear also as a figure/quality in the childhood dream? What personal insights may this understanding bring?* In order to explore this, I tried out an exercise –created by me and my advisor- with three

people and together with my advisor discussed the experiences I had working with them. This is not an academic paper, it is more an effort to describe an aspect of my learning in Process Work, by exploring some of its concepts that I find more fascinating.

I allowed the process to guide me to the choice of the subject I would work on. It was a very interesting journey that lasted almost three years and I enjoyed every moment of it. It started from January 2009, when I took part to the Intensive Course in Process Work. It was a lifetime experience that revealed new ways of thinking and being. It was there, I had the chance to work on my childhood dream for the first time and to be in touch with the 'Big U' and my life myth through it. It was also there, where I worked with a chronic body symptom that tortured me for years, and I realized how we can use the disturbing energy to favor ourselves. That is, to see the disturbance with a 'Big U' attitude, where all paths/energies/feelings are crucial. For in Process Work, it is said that within the disturbance, we find the solution.

Exploring aspects of a chronic symptom and its connections to the childhood dream through an exercise: the connections made by the persons who tried out the exercise

The exercise was meant to identify the disturbing experience of a chronic symptom, and explore if this experience can also be found in a childhood dream as a figure or quality.

The people were asked to name a chronic symptom they want to explore, to describe the feelings it creates, to choose one of them and then describe the most disturbing feature of it (X). Then they were asked to amplify the feeling, by experiencing it through different channels.

After that part was completed, they were asked to recall a childhood dream they consider important and describe it. They were asked to draw all the figures involved in the dream in the first of six boxes in a box drawing. They were then asked

to continue the story in the rest of the five boxes until they felt a sense of competition. Finally, they were asked whether the quality of the disturbance in the symptom (X), was also present in one or more of the figures of the childhood dream.

By focusing on the way that the story was completed we looked for moments where the person found some resolution in the disturbance and how this supported them in befriending the disturbing energy. The idea being, that if the disturbing energy is more befriended, it offers people the possibility to know themselves more, to create space for an expanded identity that allows for expression for more qualities .

The exercise was more focused on identifying the disturbing qualities in the chronic symptom and the childhood dream. We did not unfold the symptom or the dream, meaning we did not focus on edges, on how they appear and exploring them.

-Let us now review the answers of the people.

Person A

Person A chose to work on a body experience of heart palpitations, tightness in chest and difficulty in breathing when confronted with challenging personal relationship issues. Of the experiences the above chronic symptom creates, she chose anxiety, and the most disturbing feature of it is a pervasive phobia (X).

Her childhood dream was the following: *I am home, in my bed. And as I am there, in the family warmth, suddenly the walls start coming around my bed and I see them approaching ready to crush me. I am thinking that the bed is like a coffin, I turn in, I am leaving, and life is ending. There I wake up.*

She continued the story of the dream like this: *Eventually, the walls do not close completely, a small crack is left and I manage to get out. I feel better that I am back with my family and safe, but there is still a sense of fear. I wonder what would happen if the walls were shut down completely, how would I get out? But then I calm down and I am thinking that it's not such a big deal. Finally I made it. The dream ends with a future scene of family warmth, where I will have my husband and a family.*

She identified the disturbing feature of the symptom with the walls that were going to crush her in the childhood dream. In the sequel of the dream, she managed to befriend the disturbing energy, and feel safe again.

But as we can see, there seems to be a gap on how this was done. In the sequel, there is a sudden change of mood. While there is still a sense of fear, she suddenly made it and she calms down. This could be an example of edge behavior. We do not have enough information on how this is done. How does she manage to feel safe again?.

For her, the meaning of her dream is sharing. As she explains, when she shares her feelings she feels better, and things seem «rounder». Regarding the (X) energy, she feels that her fear (pervasive phobia) would be reduced, if she manages to express the fear and say what she feels. This is a way that she could use the (X) energy in a favorable way for her. Starting from this point, she could work further with the (X) energy, to recognize her edges, explore them and possibly overcome them.

As we did not unfold the edge signals and then process them, we cannot come to a clear conclusion about how she can integrate this persistence in her life. It could be persistence around expressing herself, even then feelings she is shy to express, or a process around sharing. We do not have enough information to have the whole picture.

Person B

Person B chose to work with panic attacks. Of the feelings this chronic symptom creates, she chose loneliness and the most disturbing feature of it is a feeling of isolation (X).

The childhood dream she described was the following: *I was driving my father's car, when in reality I didn't know how to drive yet. My co-passenger was my sister, and we were going up a mountain. My sister said to me: «But you don't know how to drive», I said: «I know». We were running away from our parents and I felt freedom, but I also felt responsible because I had my sister with me, who didn't know how to drive, but neither did I.* She continues the story of the dream: *We would leave by car and go to live somewhere else. Our parents would look for us. They would find us eventually, but we wouldn't want to go back, so they would leave us where we were.*

She identified the disturbing energy of the symptom (X) in the dream in the figure of her mother. She is the one who leaves her and her sister, she abandons, resigns. We see that the figure of the mother appears in the sequel of the dream, but not clearly enough. She says «my parents», but when asked she identifies the (X) feeling (isolation) with her mother in particular. She explains that is mostly her mother that creates this kind of feelings to her.

When she explains the meaning of the story, she notices that it is flight, a behavior that characterizes her in her everyday life, when she is confronted with problems. The way she could use the (X) energy to favor this behavior, would be to find a way to leave when she is ready and in a way that she feels ready. Moreover she can learn not to actually leave, but to see situations in a more detached «isolated» (X) way, that will help her find solutions and not to resign -like her mother did- by leaving –like she did- in the dream.

Person C

Person C chose to work with a chronic symptom of a dripping nose in wintertime. Something like an allergy, even though it is not an allergy. Of the feelings the above chronic symptom creates she chose discontentment and the most disturbing feature of it is persistence (X), a feeling that something is spreading out without her will.

Her childhood dream was the following: *I am with my mother in an open market with lots of people, but at some point I lose her. Then I get this feeling that you want to run or scream but you cannot do either of them. I cannot move my feet, or speak a voice. Suddenly, I am in a place where it seems there is a gathering of KKK, with fires and people dressed in these uniforms and hoods. I am very afraid and overwhelmed by agony. Again, I am trying to find my mother and I cannot find her, there is a feeling of threat in the air. Generally I felt like my mother may not want me, she may not want me to find her.* She continues the dream like this: *Where I am, I am looking for her and at the beginning I don't find her, but eventually I find her. She takes me by the hand and we walk through bushes and plants until we reach a point where it looks like the forest ends, and the city lies underneath with its lights etc. Even if it is not close enough, it seems as if we are just five minutes away from civilization.*

As she points out, the disturbing energy of the symptom (X) can be found in the dream in her persistence to find her mother. As a figure, it is herself who insists on finding the mother. For her, the meaning of the story is that when she persists in something, she can manage even if she is scared. She can use persistence (X), to achieve things and overcome her fear to dare these things.

Again here, we can detect an edge. Who is scared? Where does the fear come from? It would help her to understand those edges in order to overcome them and use the (X) energy in even more favorable ways for her. Also, in this dream, there are intense figures that were not processed (i.e. 'KKK'). We would need to unfold this more to understand the meaning it has for her.

Some more thoughts on the material

What we first notice from the answers of the persons, is that all three of them remembered a disturbing dream, a dream dominated by feelings of agony and threat, expressed directly or indirectly –in forms of dream figures or the general atmosphere in the dream. This could explain the reason these dreams were «chosen», because of their vivid content that arises from these threat simulations, which dominate the dream. As Bulkeley, Broughton, Sanchez & Stiller (2005) cite, when we compare children and adult's disturbing dreams, we can see that in children's dreams the aggression is usually physical and directed against the dreamer, whereas in adult's dreams the aggression tends to be verbal and directed by the dreamer to other characters.

This could lead us to conclude that children feel more physically vulnerable in dreams than adults do, something that actually reflect most children's emotional experience in the waking world. Having in mind the above, we can understand why childhood dreams are a breeding ground to study qualities that are more close to secondary identity, like the (X) energy of the disturbing feeling. The child is more spontaneous, and his /her dreaming processes are more raw and uncensored.

As we review the answers of the three persons, we find a figure/element with the energy of the chronic symptom in the childhood dream. In the exercise, we used amplification as a way to explore the energy of the body symptom. Amplification is a very important tool in Process Work. By doing that, we bring attention to the experience, sometimes by making it bigger or simply by experiencing it through different channels. In the exercise, we used drawing and movement to amplify the experience of the disturbing feeling.

Usually disturbing energies are closer to our secondary identities, so with amplification we try to get to know this disturbing energy more, to find its qualities. If we explore the edges around these qualities, sometimes we find that this disturbing energy is not so scary or unpleasant anymore. By working on edges, we are befriending marginalization.

When the persons A, B & C identified the qualities and energies in the disturbance of the chronic symptom, they were asked to focus on their childhood dream. As is mentioned above, the dreams remembered were disturbing dreams, filled with agony and threat. We asked the persons to continue narrating the dream, from the part it was stopped, and not to stop until they feel the dream is complete.

All three people completed continued the story of the dream by giving a solution to the story, and having removed the feelings of agony. Since we did not unfold the symptom or the dream, we do not have enough information to know if this agony was removed because a deeper understanding was reached or if it was edge behavior. All three persons though recognized the energy of the body symptom, in a dream figure. The energy was disturbing and they chose a disturbing dream

This, for me, is one of the many things that fascinate me with Process Work. That it is possible to find the energy of the chronic body symptom that tortures you for years, into a childhood dream you chose to remember. This could be, because in our childhood, experiences are often the formation of experiences we work through our lives. All these experiences are manifested in our childhood dreams. This is why these dreams are significant.

My learnings during this project

While designing and implementing this learning project I was given the opportunity to do the following things:

- I read books that expanded my understanding of Process Work, some of its concepts and tools.
- I designed a simple exercise to begin the exploration of some of these concepts.
- I worked with people, applying my learning and exercising my skills.
- Together with my advisor, I discussed all stages of this learning project and became more clear on the concepts used in Process Work.

- I recognized the care needed in not making quick interpretations, but allowing time for people to remain in the unknown and explore their experiences.
- I saw the importance of recognizing edge behavior and how if they are not explored, this can lead to interpretations that are closer to the primary identity.

Suggestions for further study

As I worked on this paper, I was interested in further reading and learning. I find very interesting to explore also the life myth implied in the childhood dream and make it clear to the person. How could understanding and integrating the life myth could help the person befriend the marginalized experience in the chronic body symptom? What other implications could this knowledge have to the person's life?

We would need to focus more on the edges each person meets, and work with them, explore them, understand them, so that they become clear and in that way we could make suggestions about how he/she could overcome them and integrate less know aspects of their identity into their lives.

Books & Papers that enriched my study

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